

## 2024

## First Friday Cruise-In Registration Form

Please use this form to register and select a space for the 2024 First Friday Cruise-Ins. All participants must be pre-registered.

On-site registration will only be allowed if spaces remain available and may be subject to a \$25.00 late registration fee.

RETURN THIS FORM VIA MAIL TO: Experience Mount Vernon, P.O. Box 604, Mount Vernon, Ohio 43050. CRUISE-IN DATES: June 7, 2024 and August 2, 2024

Owner Name: Mailing Address:	
Vehicle Make & Model:	
Vehicle Color:	Vehicle License Plate #:
Date(s): June 7 August 2	
By signing your full name in the sp	pace provided, you agree to the following:
Association, Inc., dba/Experience Modischarge Experience Mount Vernon, from and against any and all liability, damages to third parties and their proexperience Mount Vernon, its officers may incur arising out of or in connect while occupying any part of the Event Vernon is NOT liable or responsible in Event, including damages to third paraccordance with the laws of the State maintained only in the appropriate co that I am at least eighteen (18) years fully understand its contents, releasing	uise-Ins ("the Event") and activities related thereto, hosted by the Heritage Centre unt Vernon ("Experience Mount Vernon"), I shall hold harmless, release, and its officers, employees, agents, board of directors, committees, and all volunteers loss, costs, damages, expenses, claims or actions, and attorney fees, including operty, arising during of resulting from my participation in the Event. I shall indemnify a employees, agents, board of directors, committees, and volunteers, for any costs it ion with any act or omission on the part of the participant or the participant's guests, and you way for injuries sustained, damages incurred, or accidents occurring during the ties and their property. The Parties agree that this Agreement shall be construed in of Ohio, and that any action brought by any party hereunder may be instituted and ourt having jurisdiction over Knox County, Ohio or Knox County, Ohio. I hereby certify of age and I have carefully read this indemnity and Hold Harmless Agreement and g Experience Mount Vernon from any and all liability in regards to my participation in related thereto. I am aware that this is a contractual agreement and sign it on my own
Signature:	Date:
Print Name:	