



BOAT
ENTRY APPLICATION
 Sunday, May 16, 2010 – 7:00 AM to 4:00 PM

Please fill out the entry form completely. **TYPE OR PRINT LEGIBLY.** The completed form becomes our record of the entry. **YOU MUST SIGN THE RELEASE AND ENCLOSE THE ENTRY FEE.** Please provide a valid clearly written email address.

Owner Information

Owner Name: _____ Home Ph: _____
 Entrant Name (if not owner): _____ Work Ph: _____
 Address: _____ Mobile Ph: _____
 City: _____ State: _____ Zip: _____
 Email: _____

Please print your e-mail address clearly. It will be our primary means of communication with you.

Boat Information

Boat Name: _____
 Manufacturer: _____ Year of Mfg: _____
 Model: _____ Length: _____
 Engine Mfg: _____ Cyls: _____ Hp: _____

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

I/we the undersigned, desire to enter and participate in the Marin Sonoma Concours d'Elegance at the Marin County Civic Center, San Rafael, California to be held on Sunday May 16, 2010 and hereby submit my/our application. In consideration of the acceptance of this Application by the Marin Sonoma Concours d'Elegance Committee the undersigned does hereby: (a) accept the risks inherent in the event, and hereby releases Hospice By The Bay, the Marin County Civic Center, Marin Sonoma Concours d'Elegance and the City of San Rafael, their volunteers, committee, staff and agents from any and all loss, liability or damage caused to the Entrant or to the Entrant's personal property, including claims for negligence arising from said event; (b) warrant that automotive liability and property insurance is attached to the vehicle registered for said event, and that I/we understand that our vehicle's insurance will be solely responsible for any property damage or liability claims that occur at said event; (c) give permission to use any photographs submitted with the Entry Application, photos taken at said event and any information on the entered automobile(s) for publication in the program of said event, or any book, brochure, magazine, paper, web site or any other publication or publications at such times and in such places without restriction as the Hospice By The Bay and/or the Marin Sonoma Concours d'Elegance shall determine or permit, and the undersigned waives any and all claim for compensation; (d) certify that the undersigned has read the Rules of Entry under which said event will be conducted and agrees to abide by said Rules of Entry.

I have read the above and accept the terms and conditions.

_____	_____	_____/_____/_____
Owner Signature	Owner Name (Print)	Date
_____	_____	_____/_____/_____
Entrant Signature	Entrant Name (Print)	Date

Please send application to:
 Marin Sonoma Concours d'Elegance
 Attention: Boat Entry
 150 Paul Drive, San Rafael Ca 94903