Ninth Annual Glen Ellyn Vintage Auto Fest Registration Form



Saturday, June 1, 2024 10:00 a.m. – 3:00 p.m.

Location: Stacy's Tavern Museum & Glen Ellyn History Center

A rain or shine event!

Please submit \$15.00 per vehicle with check or money order payable to the Glen Ellyn Historical Society. Each registrant will receive 2 free tickets to Stacy's Tavern Museum to be used during 2024, a discount coupon for Stacy's Corners Store, and a dash plaque. (THE VEHICLE GATE OPENS at 9 a.m. and CLOSES at 10 a.m.)

Vehicle registration materials will be distributed the morning of the show at the entrance located at 557 Geneva Road (use driveway just west of Stacy's Tavern Museum – this property is located west of the intersection of St. Charles Road and N. Main Street, Glen Ellyn). *All vintage, antique and classic cars and clubs are welcome.* A map will be posted at: *www.GEHS.org.* Registrants will vote on the Best of Show award to be given at 2:45 p.m. The public will also vote on a Peoples' Choice Award.

Talks on historic vehicles will be held in the Glen Ellyn History Center throughout the day. Food will be for sale for lunch on the property, and a pizza-by-the-slice restaurant is located across the street.

For more information about the event, contact Jeffrey Anderson, Executive Director, Glen Ellyn Historical Society at 630-469-1867 or *director@gehs.org*.

Please Note: We request that vehicles arrive before 10:00 a.m. and remain until 3:00 p.m. If you want to park together, please arrive together. By submitting this registration form, the applicant agrees to release the Glen Ellyn Historical Society, the Village of Glen Ellyn, and the attending car clubs, and protect, indemnify, and defend them from any and all claims for any losses, damages, illnesses or injuries whatsoever arising in whole or part from operation, transportation, or display of applicant's vehicle. The applicant also grants permission to GEHS to share photos of the event and its vehicles on social media and in other publications.

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Name:			_Signature		
Address:		City:			Zip:
Phone	E-m	ail address:			
VEHICLE YEAR _	MAKE: _		MODEL		COLOR
Club Affiliation (opt	ional):				
Office Use Only:					
Interested in being d listed in the program	•		nount and enclose ch	neck payable to	GEHS. Your name will be
	\$100	\$200 \$3	00 \$400	\$500	Other