ON-SITE REGISTRATION: Thank You For Participation In Our Show & Supporting St. Jude Children's Research Hospital. Please Complete This Form And Return To The Shelter House Located In The North West Corner Of Moreland Park, Near The Intersection Of Hickman Ave & W. 12th Street. You Will Receive Your Show Information And Display Card/Ballot At That Location.

Bluegrass Legends 4 Show Pre-Registration Form

NAME _____

ADDRESS_____

CITY_____ STATE_____ZIP_____

EMAIL_____ VEHICLE TYPE: **CAR TRUCK JEEP BIKE**
Circle One

PHONE NUMBER_____

VEHICE INFORMATION

MAKE_____MODEL_____YEAR_____

COST $30.00 (EXCEPT 2 & 3 WHEEL MACHINES $20.00)
MAKE CHECKS PAYABLE TO: BLUEGRASS BIKER NEWS
Mailing Address: Bluegrass Biker News, 2442 Cascades Pointe Owensboro KY. 42301

ELECTRONIC OR EMAIL REGISTRATION: Email To: legendscarshowobky@gmail.com ELECTRONIC PAYMENT INSTRUCTIONS WILL BE SENT VIA RETURN EMAIL. (Payment form accepted include) VISA, Mastercard, Zelle, PayPal, CashApp.

Pre-Registration CLOSES AUGUST 10Th 2026 (all pre-registration entries will be eligible for bonus drawing during the show dates) PRE-REGISTRATION GUARENTEES SHOW PLACEMENT. Day of show entries may be placed according to entry time and parking availability. Thank You Bluegrass Biker News Motorcycles/Motorsports/Music.

The undersigned (on my own behalf and on behalf of my heirs, personal representatives, successors and assigns), for and in consideration of the opportunity to participate in a Show, Rally, Field Meet or Activity as a Competitor or Spectator. (Hereinafter, EVENT(S) sponsored and/or conducted By BLUEGRASS BIKER NEWS (event coordinator), and their employees, agents, subcontractors, sponsors, event team members, city of Owensboro Kentucky and its agencies. (Hereinafter, the "RELEASED PARTIES") releases and holds harmless the "RELEASED PARTIES" from any and all claims and demands, rights and causes of action of any kind whatsoever which I now have or later may have against the "RELEASED PARTIES" in any way resulting from, arising out of, or in connection with the performance of their duties and my participation in any said EVENT(S). I further agree to waive all benefits flowing from any state statute which would negate or limit the scope of this release and Indemnification Agreement, including but not limited to Section 1542 of the California Civil Code which provides: "A general release does not extend to the claims which the creditor does not know or suspect to exist in his favor at the time of executing this release, which if known to him must have materially affected his settlement with the debtor." By signing this Release, I certify that I have read this Release and fully understand it and that I am not relying on any statements or representations made by the "RELEASED PARTIES."

SIGNATURE: _____DATE: _____