Maryland AUTOMOTIVE MODELERS ASSOCIATION

Mid-Atlantic NNL

Registration Form

Please fill out this form, and we will assign the registration numbers. ***PLEASE PRINT CLEARLY.***

Name _____ Address _____

City _____ State _____ Zip Code _____

Phone ( ) _____ Club Affiliation (if any) _____

Year	Make	Model	Class	Registration no.

*Signature*_____ *Date* _____

By my signature, I hereby release the Level Volunteer Fire Company, the Maryland Automotive Modelers Association, its officers, directors, members, agents, employees, and anyone else connected with the management of this event from damages, injuries, losses, judgments, or claims from any cause whatsoever that may occur through participation in this event. Furthermore, in consideration of this entry, I agree to the use of my name and/or photo of myself and/or my vehicle(s) in connection with magazine and internet-based coverage of this event with no further compensation.

The Club reserves the final right as to placement of any model based on classes, number, and types of entries within classes