

Registration # \_\_\_\_\_



### EVENT REGISTRATION - \$5.00 / Vehicle

Return completed form and payment to Lindstrom City Hall, 13292 Sylvan Avenue, Lindstrom, MN 55045. Questions, please call 651-257-0620.

#### CONTACT INFORMATION:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

#### VEHICLE INFORMATION:

Year: \_\_\_\_\_

Make: \_\_\_\_\_

Model: \_\_\_\_\_

#### FOR OFFICE USE ONLY

Date Paid: \_\_\_\_\_ Amount: \_\_\_\_\_ Staff: \_\_\_\_\_

Cash

Check # \_\_\_\_\_

Credit Card