

Make checks payable and mail with completed registration form to:
DOHIF
PO Box 302
Oregon House, CA 95962-0302

Return form by April 27, 2019

Name of Exhibitor _____

Address _____

City _____ State _____ Zip _____
Telephone No. _____ E-Mail _____

of Tractors _____ Year, Make & Model 1) _____

2) _____ 3) _____

Add others on back side of registration form

Names of family & friends attending with you (for name tags) _____

Fees:

Registration fee by April 27, 2019 = \$20 (up to 5 tractors, \$5 for each addn)	\$ _____
Registration fee after April 27, 2019 = \$25 (up to 5 tractors, \$5 for each addn)	\$ _____
Bargain Meal Package (all 4 meals below) = \$30 (Save \$5) How many? _____	\$ _____
Saturday Continental Breakfast = \$5 How many? _____	\$ _____
Saturday night BBQ = \$15 How Many? _____	\$ _____
Sunday Pancake Breakfast = \$7 How many? _____	\$ _____
Sunday lunch = \$8 (box lunch) How many? _____	\$ _____
We will be bringing an RV for the weekend = \$20	\$ _____
Optional Donation for Community Center Operations/Improvements	\$ _____
TOTAL	\$ _____

NOTICE:

- **If your tractor does not have an ignition switch, please install a kill switch.**
- **We recommend each tractor have a working fire extinguisher on board.**
- **If you plan to carry a passenger, a wide or separate seat securely fastened on the tractor is required.**

Release

In consideration of DOHIF (Dobbins/Oregon House Improvement Foundation), granting me permission to use their property, I hereby assume all responsibility and risk of injury, death, damage, loss of tools, machinery, cars, trucks and trailers arising from my use of their property. I agree to hold DOHIF, completely free and harmless in any and all situations of injury, loss or liability related to my use of their property. No medical staff or first aid materials are planned for this event. I understand being around old equipment poses a risk and I accept that risk.

Responsible Party Signature