

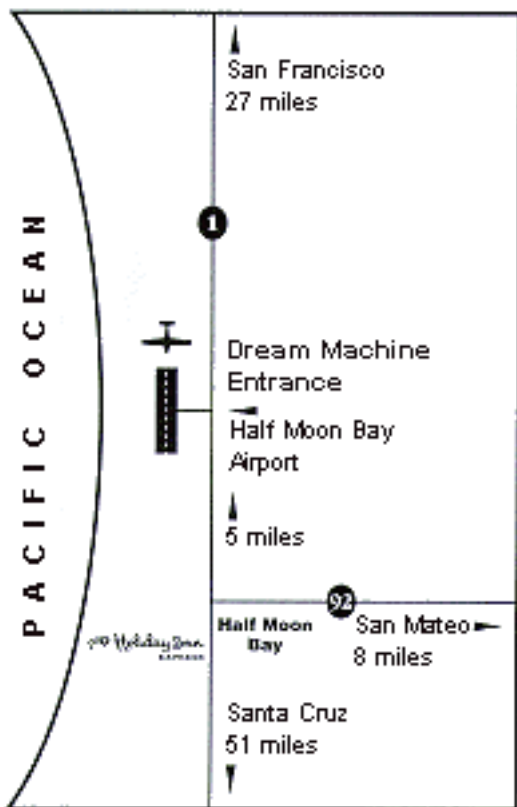
# PACIFIC COAST DREAM MACHINES

**ALL VEHICLES WELCOME**

April 25, 2010  
10am - 4pm

Half Moon Bay Airport  
Half Moon Bay, CA

No Pets Please



## REGISTRATION PROCEDURE

Entry fee is \$30 per machine for entries postmarked on or before April 15 and \$35 thereafter. PLEASE PRE-REGISTER. It makes the morning of the event much simpler and more enjoyable for everyone.

1. Please enclose entry fee with your completed application. **Make checks payable to: Coastside Adult Day Health Center.**
2. Please read and sign the release of liability. Entries will not be accepted without a signed release.
3. Detach the application and mail with a check for the entry fee to:

**Coastside Adult Day Health Center  
Pacific Coast Dream Machines Entries  
645 Correas Street  
Half Moon Bay, CA 94019**

**For information call: (650) 726-2328**

4. Entry fee entitles driver and one passenger admission to the event. Additional passengers will be charged the regular admission fees: \$20 for adults, \$10 ages 11-17 and 65+.
5. Check-in will open at 7AM at Half Moon Bay Airport on the day of the show. Registrants should be in place on the field by 9:30AM and are expected to remain on the field until 4PM. Spectators wish to see all of the machines.
6. Please assume that your application has been accepted. You will not receive verification of your application.
7. We encourage exhibitors to start their engines and show off their machines. For safety reasons, vehicles may not be moved once in place during the show.
8. Clubs and Groups: If you want to park together, please meet off site and arrive as a group. We will do our best to accommodate you.
9. For safety reasons, the use of mini-bikes, bicycles, skateboards and motorized carts is not allowed inside the airport grounds. Pets are also not allowed.
10. Individual entries are not permitted to promote commercial products.

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## ENTRY FORM

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\_\_\_\_\_  
Entrant's Last Name                      First                      Initial

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City                      State                      Zip

\_\_\_\_\_  
Daytime Phone                      Evening Phone

\_\_\_\_\_  
Make of Machine                      Model

\_\_\_\_\_  
Year                      Number of Cylinders

\_\_\_\_\_  
Body Style                      Color (Exterior/Interior)

\_\_\_\_\_  
Club Affiliations

## RELEASE OF LIABILITY

*(Entries will not be accepted without signature below.)*

The undersigned, desiring to enter and participate in the Pacific Coast Dream Machines at the Half Moon Bay Airport, Half Moon Bay, California, sponsored by the COASTSIDE ADULT DAY HEALTH CENTER, does hereby tender his/her entry. With the submission of this entry, the undersigned does hereby:

1. Release the Coastsides Adult Day Health Center, it's members, board and employees and the Half Moon Bay Airport from any and all liability arising out of said event.
2. Warrant that the undersigned has personally read the rules and regulations under which said event will be conducted and will abide by said rules and regulations.

Accepted on above terms and conditions by:

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Exhibitor (If Other Than Owner)

\_\_\_\_\_  
Dated

Mail entry with check for \$30 entry fee to:  
(\$35 for entries postmarked after April 15th)

**Coastside Adult Day Health Center  
Pacific Coast Dream Machines Entries  
645 Correas Street  
Half Moon Bay, CA 94019**