

# REGISTRATION FORM

Please return completed form with \$20 payment to:

Boat Show Chairman,  
P.O. Box 800,  
Alexandria Bay, NY 13607

before July 1, 2008.

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

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

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Boat: \_\_\_\_\_

Builder: \_\_\_\_\_

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

Restored By: \_\_\_\_\_

Award Category: \_\_\_\_\_

Your ACBS Chapter: \_\_\_\_\_

\_\_\_\_\_

Registration Fee \$20 Enclosed: \_\_\_\_\_

Friday Kick-Off @ \$17.50 ea.: \_\_\_\_\_