

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