

Midwest National Mustang Show

August 12 – 14, 2011

Presented by



COLLECTOR CAR INSURANCE



DES MOINES AIRPORT



Mustang Brand Team



Des Moines Airport Holiday Inn
Host Hotel and Show Site

Room Reservation 1-800-248-4013

Mention "Mustang" to get room rate of \$99 per night

REGISTRATION FORM

Please print

Name: _____ MCA #: _____ Exp.: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Year: _____ Model: _____
 VIN: _____ Body Style: _____ Color: _____

Judged Classes

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Concours Trailered | <input type="checkbox"/> Restomod |
| <input type="checkbox"/> Concours Driven | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Unrestored | <input type="checkbox"/> Display Only |
| <input type="checkbox"/> Thoroughbred | <input type="checkbox"/> Modified |
| <input type="checkbox"/> Occasionally Driven | |
| <input type="checkbox"/> Daily Driven | |
| <input type="checkbox"/> Under 25 (valid license required) | |
| <input type="checkbox"/> Conservator # _____ | |
| <input type="checkbox"/> Specialty (Saleen, Roush, Cobra, Shelby) | |

Entry Fees

Entry Fees	Qty	Total
Car Registration	_____	\$55.00
MCA Members	_____	-\$10.00
Vendor Spaces (10x20)	_____	\$50.00
Conservator	_____	\$20.00
Display only	_____	\$25.00
T-shirt <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL	_____	\$15.00
<input type="checkbox"/> 2X <input type="checkbox"/> 3X	_____	\$17.00
Friday Night Grill (per person)	_____	\$10.00
Sat. Night Banquet (per person)	_____	\$25.00
___ Beef ___ Turkey ___ Vegetarian (indicate choice/quantity)		
Grand Total		\$ _____

Are you willing to Judge? Yes No Are you a Gold Card Judge? Yes No Certified Judge? Yes No

I agree to abide by all show rules and understand that I am solely responsible for Car and Property. I agree to release from liability the Mustang Club of America, Mustang Club of Central Iowa (MCCI), Holiday Inn and their representatives, and all sponsors from any and all claims of injury, damage to property or lost and stolen property arising from event.

Signature: _____ Date: _____ Email: _____

Make checks payable to MCCI and mail with registration to: MCCI, PO Box 8383, Des Moines, IA 50301

All entries must pre-register. Registration deadline July 15, 2011

Contact Show Chairman Cecil O'Neal for questions 515-953-2635 or cecil@centraliowashow.com

Website: www.centraliowashow.com

