

**Slice of Shoreview  
Car and Motorcycle Show  
Application**

**Contact:** \_\_\_\_\_

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

**City, State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Primary Phone:** \_\_\_\_\_

**Alternative Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Repeat Exhibitor:** \_\_\_\_\_

**Car or Motorcycle**

**Year:** \_\_\_\_\_

**Make:** \_\_\_\_\_

**Model:** \_\_\_\_\_

**Color:** \_\_\_\_\_

**Special Features:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_