NIAGARA ANTIQUE POWER ASSOCIATION
DISPLAY REGISTRATION FORM FOR 2010

ARE YOU A MEMBER OF N.A.P.A ? _____ DO YOU HAVE YOUR OWN INSURANCE?_____

IF YOU ARE A MEMBER – ONLY FILL IN YOUR NAME

NAME_____ ADDRESS_____
NUMBER NAME OF AVE / BLVD/ STREET / ROAD

CITY/TOWN/VIL_____ POSTAL CODE/ZIP CODE_____

PHONE: _____ FAX: _____ E-MAIL_____

CHECK OFF TYPE OF DISPLAY: CARS_____ TRACTORS_____ GAS ENGINES_____ OTHER_____
LIST ALL THE ITEMS YOU ARE PLANNING TO DISPLAY AT OUR SHOW IN SPACE PROVIDED BELOW
RETURN PRE- REGISTRATION FORM TO HEADQUARTERS TO RECEIVE YOUR REGISTRATION PACKAGE.

YEAR	TYPE OR MAKE	MODEL	PARTICULAR'S