

# LÖV IN THE DESERT

## Car Show / Swap Meet Registration Form

Volvo Car Show registration is \$50.00 and includes one car entry, driver and companion entry, one t-shirt, one special edition dvd.

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Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Volvo: \_\_\_\_\_  
                    Year                      Model                      Modified?

Method of Payment:  Credit Card or PayPal,  Cash,  Check

T-shirt Size:  Small,  Medium,  Large,  X-Large,  XX-Large,  XXX-Large

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Swap Meet Spaces are \$25.00 each for a 20' x 20' space. Sales of automotive related items only, no after- market performance parts for cars 2004 or newer, please.

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Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Number of spaces: \_\_\_ Method of Payment:  Credit Card / PayPal,  Cash,  Check

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Please return this form with payment by mail to:  
Cactus Chapter VCOA, c/o Jon Yares  
12130 N, 85<sup>th</sup> Avenue,  
Peoria, AZ 85345

Or via email to [jonyares@hotmail.com](mailto:jonyares@hotmail.com)

Or via fax to: 602-944-1035.

Paypal and Credit Card Payments to Paypal Account: [jonyares@hotmail.com](mailto:jonyares@hotmail.com)



Volvo Arizona Proving Ground  
20715 West Happy Valley Road  
Wittmann, Arizona 85361

**UNDERTAKING TO OBSERVE SECRECY**

I, the undersigned, hereby confirm that I have, on this day by this document been informed of my duty to observe absolute secrecy in matters involving Volvo Car Corporation or one of its subsidiaries, hereinafter referred to as Volvo.

My duty to observe secrecy means that I must not disclose any information of a secret, confidential or intimate nature concerning the activities of Volvo or any other facts involving the said company. I am also under obligation to carefully observe those regulations laid down by the management of Volvo, the intention of which is to prevent unauthorized persons from gaining information concerning company activities. Neither have I the right to surrender material entrusted to me into the hands of any unauthorized person. These rules apply both during and after my visit at Volvo.

By the term “unauthorized person” in the above paragraph is meant those persons who cannot, with absolute certainty, be said to need the relevant information for the execution of their duties. This also includes members of my family.

In the case of any intentional infringement of the above, I shall compensate Volvo or the owner of the secret information for any damage arising in consequence of such infringement.

If I have accepted payment from a third party in conjunction with such infringement, the value of such payment shall be paid to Volvo as compensation for damages, unless Volvo can prove that the actual damage is greater.

Undertaking submitted by:

Volvo A.P.G., Wittmann, AZ

\_\_\_\_\_  
Place Company

\_\_\_\_\_  
Print Name (Clearly) Address

\_\_\_\_\_  
Drivers License Number/State of Issue Signature / (Please date)

Undertaking issued by the department within the Volvo Car Corporation specified below:

\_\_\_\_\_  
Name and designation of department Authorization/verification given by:

Volvo A.P.G. , Wittmann, AZ.  
\_\_\_\_\_  
Place and Date Signature

**Must have one form per person attending event**



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20715 West Happy Valley Road  
Wittmann, Arizona 85361

**WAIVER AND RELEASE OF LIABILITY**

In consideration of being permitted to enter its premises, drive or be a passenger in its vehicles, use its equipment, participate in any event or act in any other capacity whatsoever, the undersigned for him or herself, his or her personal representatives and heirs hereby voluntarily assumes all risks and releases and agrees to hold harmless Ford Motor Company and Volvo Cars of North America, LLC, its subsidiaries, officers, agents, and/or employees (hereafter "Releasee") from any and all liability, loss or damage to my person and/or property, including but not limited to bodily injury, death or property damage caused by any act or failure to act, whether negligent or otherwise of Releasee.

This waiver is made with full knowledge of all rights which otherwise might accrue to me or to my heirs, executors, administrators, or assigns. I acknowledge that I have read and understand the above and agree to be bound by its terms.

\_\_\_\_\_ (Print Name) \_\_\_\_\_ (Signature)

\_\_\_\_\_ (Company)

\_\_\_\_\_ (Date)

Must have one form per person attending event