

29th Annual



Official Spectator Ticket Order Form

Please Read Carefully
May 16-17-18-19, 2019
Ocean City Maryland
(Please Print & Complete Entirely)

Name _____

Address _____

City _____ State _____ Zip _____

Home # _____ Cell # _____ E-mail _____

Event passes are good for all four days and may be purchased in advance (before May 9, 2019) for \$25 each. This allows spectator entrance into the event for one person (no vehicles).

Locations include Inlet Parking Lot & Convention Center.

All Tickets will be reserved and held for **pick up at the OC Convention Center during Cruisin.** Tickets will be held under last name and may only be picked up at the Cruisin Information Desk on Wednesday 12noon-4pm, Thursday 7:30am-4pm, Friday 7:30am-4pm or Saturday 7:30am-10am

_____ Number of Event Passes you would like to purchase now for \$25 each

Make check payable and mail to:

SEP – Cruisin Ocean City

PO Box 616

Mayo MD 21106

Please do not mail after May 1, 2019

I agree to comply with all rules, regulations and policies of this event and understand the risks of participating in a car show. I assume all risk of personal injury, loss, theft or damage to property. Neither Special Event Productions, Inc., the Town of Ocean City, producers, sponsors, support personnel or anyone else connected with the presentation of this event shall be responsible or liable for any loss, injury or damage incurred. Any poor behavior and/or conduct deemed objectionable to the event's well being may result in me being denied any further involvement in the event and/or future events. Event credentials are non-transferable without written permission of event management. This event is held rain or shine. Event Passes are non-refundable. If paying by credit card I authorize Special Events to charge my credit card the amount shown below.. Schedule/activities are subject to change.

Signature _____ Date _____ Amount Paid \$ _____

If Paying by Credit Card: ___ Visa ___ M/C ___ Discover Name on Card: _____

Credit Card #: _____ - _____ - _____ Exp Date: _____ CVV Code: _____