

## 48<sup>th</sup> Annual TEXAS "T" Party Registration Form Marshall, Texas

## October 7<sup>th</sup> - October 12<sup>th</sup>, 2025



## Please Return Completed Form and Payment by August 31, 2025

Registrant Driver's Name:						D	OB:		
Mailing Address:									
	Home Phone #:								
Email address:									
T Year/Model:			Model T Club: Policy Number:						
List Adult Passenger Names below:			List Youth Passengers below (12 and younger):						
Are you trailering your Model T to host city?	YES	or <b>NO</b>	Chec	k one)	Dista	ance: _			
Are you driving your Model T to host city?	YES	or <b>NO</b>	(chec	k one)	Dista	ance: _			
In Case of Emergency Contact Name & Phor	ne Num	ber:							
Registration Fee	#	Fee	Total						
Car & Driver:		\$185.00							
Adult Passengers:		\$160.00							
Youth Passengers (12 and under):		\$0.00							
Extra Photo:		\$15.00							
Extra Tour Book:		\$15.00							
Dangles:		\$5.00							
Extra T-Shirts (1 Included):		\$20.00		Sm _	Med _	Lg	_ XL _	2X	
Total Enclosed and due by August 31,	2025:								
Guest Tickets: Call for single day prices. If participal Refund Policy: If your plans change after you regivendors base their pricing on a guaranteed minimizancellations after August 1, 2025, will be made on a	ister, we	e will do our b e will make a	est to acco	mmoda d if you	te cancella cancel by	ations. Ho	, 2025.	Refunds for	
Photography and videography will be taken on the A images and/or videos of yourself and your family me	nnual Te	exas T Party to	our. By virtu	ue of you	ır registrat	ion, you c	consent	to the use of	
The SPACE CITY T'S of Houston is a chapter of TI Model T's. Many hours have gone into hosting this of THE SPACE CITY T'S of Houston and each of its regligence of the Registrant, his agents or employed Houston or any of its members. Registrant also certifications are supported to the second secon	event. R nembers ees or p	Registrants, by s harmless fro passengers, a	signing thi m all claim nd/or the o	s registr s, dema rdinary r	ation form inds and c negligence	, agree to auses of of THE	indem action a SPACE	nify and hold arising out of CITY T'S of	
Registrant Signature:					ate:				
Make checks payable to: SPACE CITY T'S and mail	to: Kath	nv Jo Butenscl	noen 2326	County I	Road 328	DeBerry	TX 756	39 If you	

have questions, call Dave Butenschoen 360-661-4421 or Kathy Jo Butenschoen 318-469-5584.