



REGISTRATION FORM

Saturday May 2, 2026

9:00am - 1:00pm

250 Jaguar Trail, Ridgeland, SC

PARTICIPANT INFO (Please print clearly):

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ E-MAIL: _____

CAR / BIKE CLUB AFFILIATION: YES ___ NO ___

NAME OF CLUB: _____

VEHICLE INFO:

YEAR: _____ MAKE: _____ MODEL: _____ COLOR: _____

CLASS ENTERED: _____

How did you hear about this event? _____

Registration Fee: \$25.00

Total Due: _____

**Make checks payable to "Caring Hearts of SC"
1570 Driggers Lane
Ridgeland, SC 29936**

Or email caringheartsofsc@gmail.com

For payment go to our website, caringheartsofsc.com then go to the donate button, in the subject / memo line and put info.