Builder Sheet

SOCALOPED SEE



Builder #:

Builder Name:		
Builder Entry		
#(s):		
Email Address:		
Home Street:		
City, State, Zip:		
Phone:		
If you would like to be added to Laski Scale Specialties email list for future		
shows and special product offers, please check box.		
I wish to enter the above model(s) in the So Cal Open and by affirming my		
signature below I	affirm and agree to the following:	
1. The assem	bly and finish of the above listed model is the sole work of the	

3. I agree to allow Laski Scale Specialties and/or the So Cal Classic Chevy

4. I agree that I will hold the Laski Scale Specialties and all individual

Club to publish photos and/or descriptions of these entries and of myself,

members as well as model specialty judge(s) free of any liabilities for loss

2. I agree to recognize that the voters' decisions are final.

should I receive award(s) for my entry.

or damage to the entered model.

entrant.

Signature:

Model Form



Presented By



Builder Name: Kit Manufacturer:

Subject or Name:

Please tell us about your model – construction, after market additions, finish details, etc.:

Model Form			
Entry #	SOFALQUEL CAR SHOW	Presented By	
Builder Name:			
Kit Manufacturer:			
Subject or Name:			
Please tell us about	your model – construction, after market additio	ns, finish details, etc.:	

Entry #