



**MAY DAY IN THE BAY**

**SWAP MEET REGISTRATION FORM**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**REPRESENTING A GROUP:**      YES      NO

**IF YES, GROUP NAME:** \_\_\_\_\_

**NUMBER OF SPACES REQUESTED:** \_\_\_\_\_

*(\$30 CASH PER 20' X 20' SPACE – MUST FIT SPACE REQUESTED AND PAID FOR)*

**APPLICANT HAS READ RULES**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**(PLEASE COMPLETE FORM AND SEND TO MSTO-NWO, 1425 WALSH STREET, THUNDER BAY, ON, P7E 4X6 OR DROP OFF AT EXCALIBUR MOTORCYCLE WORKS LIMITED – SAME ADDRESS AS ABOVE)**

**BELOW FOR MSTO-NWO**

**# OF SPACES ALLOTTED:** \_\_\_\_\_ **CASH RECEIVED:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_