



# PARADE TO THE IH ARCHIVES

10:00 AM FRIDAY JULY 24<sup>TH</sup> 2009

TRACTOR PARADE FROM THE RED POWER ROUNDUP TO THE WISCONSIN HISTORICAL SOCIETY AND THE IH-McCORMICK ARCHIVES. THIS IS A FUND RAISER FOR THE McCORMICK-INTERNATIONAL HARVESTER COLLECTION.

Tax Deductable Donation of \$20 per person. Open to all Trucks, Scouts and Tractors. No steel wheels, Cubs or Cub Cadets. Operators must have a valid driver's license.

Parade Marshall: Michael Perry Author of "Truck: A Love Story"

Limit of 200 entries. Please send name, address, phone number and check to:

Parade to the IH Archives  
% Mike Schmudlach  
538 Windmill Road  
Brooklyn, Wisconsin 53521  
608-4552700

Make Check Payable to:  
IHCC Wisconsin Chapter #4 Inc  
For more information, rules and  
a printable registration form. Go to:  
[www.ihwisconsin.org](http://www.ihwisconsin.org)

## Rules:

1. Drivers will be at least 16 years of age and have a valid driver's license.
2. Will follow the designated parade route, all traffic laws and parade monitors
3. Will not carry riders unless suitable seats are provided.
4. Must have made the \$20 donation and signed the registration form.

In consideration of your acceptance of this entry, I hereby, for myself, my heirs, my executors, administrators, waive any and all rights and claims for damage I may have against individuals associated with this event, its agencies, representatives, successors and assigns, for any and all injuries suffered by me in said event. I attest and verify that I have full knowledge of the risks involved in this event and am physically able and sufficiently trained to participate in this event. I pledge to hold safety as the highest priority on the Parade to the IH Archives Parade. I understand the parade organizers reserve the right to limit the number of vehicles in the parade in order to control traffic and other administrative tasks. I give my permission for the free use of my name and picture in any broadcast, telecast, or print media account of this event.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

City: \_\_\_\_\_

e-mail: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Signature: \_\_\_\_\_