

46TH ANNUAL

# EAGLE RIVER CAR & TRUCK SHOW

FEATURING CLASSIC CARS & TRUCKS



**SATURDAY, AUGUST 29, 2026**

**9AM - 3PM**

**DOWNTOWN EAGLE RIVER, WI**



## EVENT REGISTRATION FORM

**SUBMIT TO:** EAGLE RIVER AREA CHAMBER OF COMMERCE  
P.O. BOX 1917 - CTS  
EAGLE RIVER, WI 54521  
715-479-6400 OR EMAIL: [EVENTS@EAGLERIVER.ORG](mailto:EVENTS@EAGLERIVER.ORG)

### OFFICE USE ONLY

CHECK#: \_\_\_\_\_

AMT PAID: \_\_\_\_\_

POST MARK: \_\_\_\_\_

**REGISTRATION FEE PER VEHICLE: \$20**

**DAY OF REGISTRATIONS - REGISTER FROM 7AM - 10AM TO BE INCLUDED IN JUDGING. SHOW LIMITED TO 225 VEHICLES.**

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

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

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

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

### ENTRIES:

**MAKE:** \_\_\_\_\_ **MODEL:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_ **CATEGORY:** \_\_\_\_\_

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**CATEGORY TO BE JUDGE IN: (PLEASE CHOOSE ONLY 1 CATEGORY LETTER PER VEHICLE)**

**A - PRE-1950**

**E - 70'S ORIGINAL**

**I - 2000 - 2012**

**M - TRUCK MODIFIED**

**B - 50'S**

**F - 70'S MODIFIED**

**J - 2013 - PRESENT**

**N - VINTAGE UNRESTORED**

**C - 60'S ORIGINAL**

**G - 80'S**

**K - CUSTOM HOT ROD**

**PRE-1990**

**D - 60'S MODIFIED**

**H - 90'S**

**L - TRUCK ORIGINAL**

**\*NOTE: ALL WILL BE ELIGIBLE FOR PEOPLE'S CHOICE AND BEST OF SHOW AWARDS\***

I hereby state that I have read, understand and will abide by the Eagle River Car & Truck Show guidelines. I also agree to waive all claims against the Eagle River Area Chamber of Commerce, Eagle River Chamber Event Volunteers, Downtown Eagle River Businesses and the City of Eagle River for any injury that may occur to my representatives or myself and/or loss or damage to my merchandise, equipment, personal property, and vehicle entries from any causes. I further understand that it is recommended and suggested that I obtain adequate insurance coverage at my own expense for property loss/damage and liability for personal injury.

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Method of Payment:** Please make checks/money orders payable to the Eagle River Chamber of Commerce and please note credit card transactions are subject to a 5% transaction fee.

☐ Check ☐ Money Order ☐ Credit Card

**Credit Card Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_ **CVC#:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

This application must be submitted with signature and accompany full payment to:  
Eagle River Area Chamber of Commerce - P.O.Box 1917, Eagle River, WI 54521