



## 1<sup>ST</sup> ANNUAL VALVE COVER CAR SHOW HITS CHARLOTTE, NC

Get ready, car fanatics! We will have the 1<sup>st</sup> Valve Cover Car Show at ARA's 65th Annual Convention and Exposition.

Every car owner entered will build their own car from a valve cover of their choice, as long as it meets specs below. Make sure you print up a small information placard so that everyone will know who the car owner is and any information you would like to share about your vehicle. We will have a **BEST OF SHOW** competition where the cars will be on display and you and others can buy tickets to vote on your favorite car. The key here, and the winning edge, is to vote often and it is legal to buy as many votes as money will buy. The winner will receive 50% of the money raised during voting and the other 50% will benefit the ARA Educational Foundation. The cars will be on display in the ARA Exposition Hall so the voting will continue until Noon on Saturday, with the winner announced between 12:45pm and 1:00pm, at the closing of the Exhibit Hall.

Specs for the cars are:

- 30" maximum overall car length
- 10" maximum overall car width (including wheels)
- 10" maximum overall car height
- No engines or propulsion
- Wheels can be attached in any manner but not beyond the front of the valve cover
- Cars shall be based on actual automobile valve covers from engines
- Cars must have 4 wheels, each no more than 6" in diameter

Enter now to secure your chance of being the 2011 winner of the **BEST of SHOW!**

Only the first 100 entries will be accepted so enter early to secure your place in the show.

Entry fee \$200

**ALL PROCEEDS BENEFIT THE ARA EDUCATIONAL FOUNDATION**



**1<sup>ST</sup> ANNUAL VALVE COVER CAR SHOW  
ENTRY FORM**

CAR OWNER/S NAME: \_\_\_\_\_

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

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

E-MAIL: \_\_\_\_\_

PAYMENT METHOD: (\$200 PER ENTRY)

Total amount: \$ \_\_\_\_\_ in U.S. Funds only

Check one:

Cash: \_\_\_\_\_ Credit Card: \_\_\_\_\_ Check (payable to ARA Educational Foundation): \_\_\_\_\_

Card Type: (Circle One)      MasterCard / Visa / AmEx

Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Zip/Postal Code (where billed): \_\_\_\_\_ Name on Card: \_\_\_\_\_

Billing address if different from address shown above:  
\_\_\_\_\_  
\_\_\_\_\_

Fax your completed form to: (571) 208-0430 or mail with your check to:  
ARA, 9113 Church St., Manassas, VA 20110-5456

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