







May 6-9 2025

R E G I S T R A T I O N F O R M

Registrant:		HCCA Mem	bership Number:
Address:		City:	State: Zip:
Day Phone:	Em	ail:	<u></u>
Spouse / Partner Inform	mation For Name Tags		Questions?
First Name:	Last Name:		
Guest(s) Information F	For Name Tags		47
First Name:	Last Name:		Contact Don Azevedo
First Name:	Last Name:		\mathcal{H}
First Name:	Last Name:		(925) 301-5315 Imnuts4fords@comcast.net
Please make y	vour hotel	le Year:	Pre-1916 vehicles are encouraged.
	Make	& Model:	
OXFC)RD Insura	ance Carrier:	Policy #:
·SUITI	ES · Ple	Please send Deposit of \$50 to reserve your place on the Tour.	
800 4 th Street - F	Paso Robles	Final cost of Tour to be determined.	
(805) 237		lease make check payable to: 25 California Rendezvous	Don Azevedo 42167 River Knolls Place





Mail completed form and check to:



Registration deadline April 15, 2025



Coarsegold, CA 93614

Includes full breakfast daily and

Check-in 5/6 - Check-out 5/10

Group Code: California Rendezvous Tour

Group Rate: Tues - Thurs \$155/night Friday \$190/night + tax