

Local Race Registration Form

CAR NUMBER Local Director's Use Only	

MARK WHICH DIVISION YOU ARE PARTICIPATING IN:

STOCK	SUPER STO	OCK [MASTE	RS	
Participant's Name	Local F	Race City Org	ganization		
Mailing Address	City			State	Zip Code
Phone School		Grade	Age	Date of	
Parent/Guardian Email:				(At	tach Copy of Birth Certificate)
Is your car sponsored? No Yes Sponsored	by:				
I,, racer of a	a Soap Box Der	by car enter	ed in the c	official Soap	Box Derby Local Race
being held in current construction plans and rules published by th	_, hereby certif	y that my cai	has beer	built in full	compliance with the most
	e memalional	оар вох De	•		
Participant Signature			Date		
Parent/Guardian's Name		Relat	ionship to	Participant	
Mailing Address	City			State	Zip Code
I,(parent/guard	lian), hereby ce	rtify that my	son/daugl	nter/ward,	,
entrant in the official Soap Box Derby Local Race be	eing held in				, has read the above
statement completed by my son/daughter/ward and	know the facts	stated there	in to be tri	Je.	
Further, I hereby grant permission for my son/daugh					
, and in the Race, to participate in the FirstEnergy All-American					
	-				•
Further, I understand and agree that, as a prerequist Ohio, that my son/daughter/ward, together with his/					
Ohio by the International Soap Box Derby, Inc. I ful					
manner and methods deemed appropriate by the In	ternational Soa	p Box Derby	Inc., in it	s sole discre	etion, to determine
compliance with its rules, spirit and specifications at					
Derby, Inc. and its officials regarding qualification, d to that division shall be final and binding upon me, n		•			t and specification applicable
			•		
Finally, I, as such parent or guardian, in consideration mutual benefits received by myself and my child and					
rights, causes of action, demands or otherwise, whe					
expenses which I, as a parent/guardian, and/or my					
the International Soap Box Derby, Inc., and/or its sp whatsoever, arising from or in any manner related to					
FirstEnergy All-American Soap Box Derby and/or a					c Local Goap Box Belby, the
Parent/Guardian Signature			Date		
Local Race Director's Name					
Mailing Address	City			State	Zip Code
I,, the Loca		of the officia	l Soap Bo	x Derby Loc	al Race being conducted by
(sponsor),	have read the s	tatement abo	out, signed	d by the enti	ant and his or her parent/
guardian, and understand the facts therein to be tru- requirements for the Stock, Super Stock, or Masters		cted his/her (car and, in	my opinion	, it meets all construction
Local Race Director Signature			Date		