



NORTON
Children's
 Hospital

Super Kids Classic Registration Form



Participant's Name _____ Local Race Organization Kiwanis Club of Bowling Green

Mailing Address _____

City _____ State _____ Zip Code _____ Phone _____

School _____ Grade _____ Age _____ DOB _____

Weight _____ Male/Female

Parent/Guardian Email _____

Sponsored by _____

Parent/Guardian's Name _____ Relationship to Participant _____

Mailing Address _____ City _____ State _____ Zip Code _____

Disability _____ Special Equipment needed? _____

If you have a wheelchair is it a soft, collapsible, hard, or electric? _____

Will you have a service dog? YES _____ NO _____

Please provide a copy of racers Birth Certificate

PARENT/GUARDIAN WAIVER

I/We, the parents or guardian of the above named child, for ourselves and on behalf of said minor child, hereby agree that the said child's participation in the Norton Children's Hospital - Meijer Super Kids Classic shall be undertaken at your own risk and that the Kiwanis Club of Bowling Green Foundation and it's sponsors shall not be liable for any claims, injuries, or damages which might occur to said child, his/her property, honor to said parents/guardians arising out of or connected with said minor child's participation in the Norton Children's Hospital - Meijer Super Kids Classic. It is understood this event is covered by media and you have voluntarily agreed that all photos and publicity are the property of and for the sole use of the Kiwanis Club of Bowling Green Foundation.

Signed: _____ Date: _____

Relationship to participating child: _____

PHOTOGRAPH RELEASE FORM

In consideration of my child's picture being taken, upon the terms hereinafter stated, I hereby grant the Kiwanis Club of Bowling Green the absolute right and permission to use, reuse and publish, and republish photographic portraits or pictures of (stated child) in which they may be included, in whole or in part, for advertising, media, or any other purpose beneficial to the Norton Children's Hospital - Meijer Super Kids Classic and/or TRUIST All-American Soap Box Derby, which is organized by the Kiwanis Club of Bowling Green, KY.

I hereby warrant that I am the parent/legal guardian of said child and state that I have read the above authorization, release, and agreement prior to its execution, and that I am fully familiar with the contents thereof.

Parent/guardian signature _____



NORTON
Children's
Hospital



NORTON CHILDREN'S HOSPITAL - MEIJER SUPER KIDS CLASSIC

DOCTOR'S EXAMINATION FORM

(TO BE COMPLETED BY PHYSICIAN)

Participant's Name: _____

Age _____ Height _____ Weight _____

Should there be any limitations placed on this child's participation in the Norton Children's Hospital - Meijer Super Kids Classic? Yes _____ No _____

Does this child have known allergies to any medications? _____

Are there any allergies to food? _____

Recommendations: (use attachment if necessary)

I have on this date _____ examined the above participant and on the basis of my examination, as requested by the Norton Children's Hospital - Meijer Super Kids Classic officials, and his/her medical history as furnished to me, I find no reason which would make it medically inadvisable for this child to compete in a supervised soap box derby activity. (Note exceptions above).

Physician's Signature _____

Name print _____

Address _____

City _____ State _____ Zip _____

Telephone _____

Racer Bio Sheet - SuperKids

This information will be used to introduce your racer when they race so please print clearly.

Racer's Name: (First) _____ (Last) _____

Hair color: _____ Age: _____

Nickname: _____

Check one: Son Daughter of _____

Sponsored by: _____

City where you live: _____

Number of children in family: _____ School: _____

What grade are you in? _____

Have you raced before? _____ Racing since: _____

What is your favorite sport or activity? _____

Who is your favorite famous person? _____

Who is the person you look up to most? _____

What is your favorite music group or singer? _____

What is your favorite song? _____

What is your favorite food? _____

What is your secret to winning the race? _____

What was the hardest part to building your race car? _____

Do you have a good luck charm? If so, what is it? _____