

EASTERN MAINE SOAP BOX DERBY

Awarded **"OUTSTANDING RACE CITY 1998, 2003 & 2007"** By the All-American Soap Box Derby

REGISTRATION / LIABILITY RELEASE FORM—2009 14th ANNUAL - RACE DATE: May 30, 2009

Age Requirements for 2009: Stock Division - ages 8 - 13 Super Stock Division - ages 10 - 17 Masters Division - ages 10 - 17

You must be the minimum age of the division by the race date of May 30, 2009, and cannot exceed the maximum age of the division before July 25, 2009.

There is a non-refundable \$35 fee (due at registration). <u>Register early - Registration deadline is May 9</u> and space is limited. For information call 992-4490.

Participant's Name	Age Date of Birth	
Address	City	Zip code
Male Female T-S	Shirt Size: (Youth Sm Md Lg)	(Adult Sm Md Lg)
Division: Stock Super Stock N	Masters Do you have a car? Yes /	No - If yes, car #?
Have you participated in a Soap Box	A Derby Race before? Yes / No	
Parent/Guardian Name:	Phone Number	
Parent e-mail	Racer e-mail	
	<u>her racer, the car must be rebuilt by th</u> If yes, Sponsor(s) name(s) (may be mo	
	nr due by May 1 st 2009 for cars sponsor pt) Do you want us to bill them direct	
Sponsor Address:		Phone
In case of Emergency please notify:	Phone:	Work/Cell
Any medical conditions we should be aw	vare of?	
Maine Soap Box Derby. I am aware that particip dangers and risks of participating in the above abilities to earn a living and to engage in other b above activity, I recognize the importance of consideration of the Eastern Maine Soap Box I activities related to the program including, bu	rdian, give my permission for pating in any sport can be a dangerous activity invol- sport may result not only in serious injury, but a pusiness, social and recreational activities. Because following instructions regarding participation a Derby Inc. permitting me to participate in the pu t not limited to, practicing or participating in the report all of my injuries to Eastern Maine Soap	ving risks or injury. I understand that the also in a serious impairment of my future of the dangers of such participating in the nd agree to obey such instructions. In rogram indicated above and engage in all be program, I herby assume all the risks
Participant's Signature:		Date:

Participant's Signature:	Date:	
Parent / Guardian Signature:	Date:	
PLEASE ATTACH A PHOTOCOPY OF THE PARTICIPANT'S BIRTH CERTIFICATE (if a new		

PLEASE ATTACH A PHOTOCOPY OF THE PARTICIPANT'S BIRTH CERTIFICATE (if a new racer) AND A CHECK PAYABLE TO: <u>Eastern Maine Soap Box Derby</u> IN THE AMOUNT OF \$35.00 Mail to EMSBD c/o Bangor Parks & Rec. 647 Main Street Bangor, ME 04401 (www.emsbd.org)