



PLEASE PRINT NEATLY
ALL INFORMATION MUST BE IN ENGLISH

APPLICATION TO PARTICIPATE

LAST NAME _____ MAILING ADDRESS _____

CITY, STATE, ZIP _____ EMAIL _____

HOME PHONE _____ CELL _____ BEST TIME CALL _____

ADULTS: All adults must bring a valid photo ID to event registration, and names on ID must match names on registration. Please indicate which languages you speak English Spanish Multi-lingual

(circle one)

LAST NAME _____ FIRST NAME _____ MOM/DAD/OTHER _____

DATE OF BIRTH _____ TEE SHIRT SIZE _____ SPECIAL NEEDS _____

(circle one)

LAST NAME _____ FIRST NAME _____ MOM/DAD/OTHER _____

DATE OF BIRTH _____ TEE SHIRT SIZE _____ SPECIAL NEEDS _____

MINORS: Anyone under 18 must have a parent with them at the track at ALL times.

IS YOUR CHILD IN TREATMENT OR WITHIN 12 MONTHS OF RECEIVING TREATMENT? YES _____ NO _____

LAST NAME	FIRST NAME	Male or Female	DATE OF BIRTH	TEE SHIRT SIZE
_____	_____	M F	_____	_____
_____	_____	M F	_____	_____
_____	_____	M F	_____	_____
_____	_____	M F	_____	_____
_____	_____	M F	_____	_____

EXTRA NAMES CAN GO ON OVERFLOW SHEET!

Do any of these children have special needs? _____? Name(s) of Child or Children with special needs. _____

Define needs _____

Days you plan on participating? FRIDAY SATURDAY SUNDAY (please circle) WORKERS ONLY. THURS.

Days you will need a room FRIDAY SATURDAY (nights) (please circle) WORKERS ONLY. THURS.

Have you read all the rules and regulations in the letter sent to you or that you received online??? YES NO (please circle)

FORM PREPARED AND SUBMITTED BY: _____ DATE _____

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