

GENEVA, IL KIWANIS SOAP BOX DERBY RACER'S AND PARENT INFO

(1 Form is required for each racer) Form is due 2 weeks prior to race date

CAR # _____ (For Official Use Only)

M _____ F _____

Driver Info

Name _____ Nickname _____

City _____ Age on race day ____ Parents' Name _____

School _____ Grade _____

After High School or College I want to: _____

Sisters/Brothers at home: _____ Name and ages _____

Favorite vacation _____

What I like most about my mom and dad _____

Hobbies: _____

Pets: _____

How many years racing? ____ Do you have a role model? _____

Parent Info

Driver's T Shirt size: Adult S ____ M ____ L ____ Additional race day t-shirts at \$15 each _____

Adult S ____ Qty. ____ M ____ Qty. ____ L ____ Qty. ____ XL ____ Qty. ____

Number of immediate family members (excluding your racer) attending awards ceremony dinner _____

Good luck messages are available in the race day program at \$10 each Yes ____ No ____

Please print your good luck message in the box

Make check payable to Kiwanis Club of Geneva