

2017 Cardboard Boat Race Registration

Team Member 1 Information:

Name: _____

Age: _____

Address: _____

City, State, Zip: _____

Phone: _____

Team Member 2 Information:

Name: _____

Age: _____

Address: _____

City, State, Zip: _____

Phone: _____

Acknowledgement

By submitting this registration form, all team members attest to having read and understood all rules for the event and agree to comply by them. Violation of the rules can lead to disqualification without refund.