**DEMOLITION DERBY OFFICIAL ENTRY FORM**

**Event Date:** Saturday, July 30, 2022- 6:00pm

**Location:** Frederick County Fairgrounds, Clear Brook, VA

**\*Please complete the following Entry Form and print legibly. \***

**Circle the class you’ll be participating in for this event.**

4 Cylinder Figure 8

 6 Cylinder Figure 8

8 Cylinder Bang Up (Regular Derby)

 **NUMBER ON VEHICLE:\_\_\_\_\_\_\_\_\_**

Driver Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age:\_\_\_\_\_\_\_\_\_\_\_

Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Driver’s License Information:**

Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_ Expiration:\_\_\_\_\_\_\_\_\_\_

**I have read the rules and accept the decision of the judges as final and elect to use the ground and/or track in the present condition. I agree to have my vehicle at the event area, teched, and registered at least one and a half hours prior to show time. I agree to produce a valid driver’s license upon registering for the Demolition Derby.**

***Entry Fee: Discounted Pre-Registration Fee $20.00 (cash) per car*** *OR* ***$30.00 (cash) per car on day of event. Money must accompany this form.***

**I hereby expressly release both the producer and sponsors and all of their associates for any injuries of any kind or nature, or death, which may occur or be received as a result of my participation in this Demolition Derby, and I hereby expressly waive all claim for injuries or death that may occur while being a contestant in said contest.**

Driver Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_