



ENTRY FORM

ENTRY# _____

DRIVER INFORMATION

Name _____ Age _____

Address _____ City/State/Zip _____

Phone _____

Email _____ Occupation _____

VEHICLE INFORMATION

Year _____ Make _____ Model _____ Engine _____

Driver/Rider Background _____

Sponsors _____

Misc Info: THIS EVENT IS AT MY OWN RISK AND I TAKE FULL RESPONSIBILITY FOR MY PARTICIPATION. I FURTHER RELEASE LILFOOT MOTORSPORTS, GARFIELD COUNTY FAIR; THEIR OFFICERS, EMPLOYEES, VOLUNTEERS, OFFICIALS, SPONSORS, AND ALL OTHER ENTITIES INVOLVED, FROM ANY AND LIABILITY ASSOCIATED WITH MY PARTICIPATION

Signed _____ Date _____