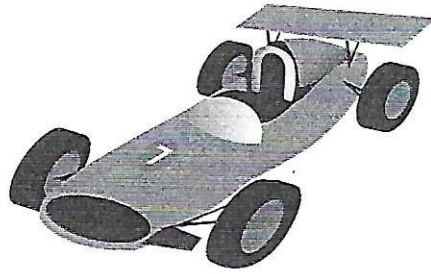


Box Car Race Registration Form



Participant Name: _____

Participant Age: _____

Participant Phone #: _____

Description of Car: _____

*Race will begin promptly at 1:15 adjacent from the lighthouse. Racers not checked in by 1 will not be permitted to race.