

# DERBY REGISTRATION FORM

Please print & fill out this form in its entirety and return it, with registration fee to:  
Quincy Valley Tourism P.O. Box 668 Quincy WA 98848

**ENTRY FORM / WAIVER** Sponsors, nor their agents, the Quincy Valley Chamber of Commerce, nor its members, the City Of Quincy or its employees, Grant County, Grant County PUD, Washington State, nor any of the Sponsors accepts any responsibility for loss, damage or injury to any vehicle, vessel, boat, equipment, contestant, passengers, guests, or observers during this event. By purchase of a Derby ticket or volunteering in any capacity, you release and discharge the Quincy Valley Chamber of Commerce and its members, The Sponsors and all their associated affiliates and employees, for any and all judgments and/or claims from any cause whatsoever that may be suffered by an entrant to his/her person and/or property. The signature on this entry form denotes the agreement with all rules and waivers of liability by the above mentioned. Any entrant under 18 years of age requires the signature of a parent on application.

**RECEIPT NO.** \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ Fee \$ \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
E-Mail \_\_\_\_\_ Phone \_\_\_\_\_  
WRISTBAND NUMBER \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_ Fee \$ \_\_\_\_\_  
Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
E-Mail \_\_\_\_\_ Phone \_\_\_\_\_  
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Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
E-Mail \_\_\_\_\_ Phone \_\_\_\_\_  
WRISTBAND NUMBER \_\_\_\_\_

Date \_\_\_\_\_ Total Paid \_\_\_\_\_

Signature \_\_\_\_\_  
Signature \_\_\_\_\_  
Signature \_\_\_\_\_  
Signature \_\_\_\_\_  
Signature \_\_\_\_\_

Parental Signature of Minors under age 18