Rock Springs Firefighters Local#1499
Demolition Derby Entry Form Number_____

Circle One

Standard-Car Truck 80's Class Car
Compact Car

WWW.RSFF1499.COM

Name:_____ Age:_____ Years in Derby:_____

Address:_____ _____
Street **City**

_____ _____
State/zip **Phone number-required**

Vehicle Owner: _____

Vehicle Info: _____
Year **Make** **Model**

Sponsors: 1) _____ 2)_____

3) _____ 4)_____

1. I have read the rules and accept the decisions of the judges as final. I understand that there is a **$100.00 non-refundable entry fee due with this form**.
2. I understand that this entry/ release form **will not be accepted after established entry deadline**.
3. I understand that this entry/ release form **will not be accepted at the entry gate upon arrival at the Demolition Derby.**
4. I understand that if alcoholic beverages, alcohol on the breath, or drugs are found in or around my car, equipment, or being used by myself or members of my pit crew, **my entry will be disqualified resulting in myself and my pit crew being removed from the pit area.**
5. **I understand that the Rock Springs Firefighters Local 1499 and the Sweetwater County Fair Board are not responsible for any loss incurred through fire. theft, or vandalism.**
6. **I understand that I will participate in the derby at my own risk. I release the Rock Springs Firefighters Local 1499 and the Sweetwater County Fair Board from any injuries that may result by my participation in the derby**.
7. **I will take my car/truck home on Saturday night, or will pay a $200.00 towing and any other storage expenses fee.**

Signature: _____ Date: _____