

2009 Iceman Registration Junior

New Rider / Racer

Race Category: _____

First name: _____

Last Name: _____

Address 1: _____

Address 2: _____

City: _____

State: _____

Zip Code: _____

Phone #: _____

E-mail: _____

Gender: _____

Birthday: _____

Age: _____

Your age as of December 31st 2009

Emergency Contact: _____

Team Name: _____

Please fill out attach form and mail back with \$65.00 entry fee to:

Kids Race Sports Development Inc.

P.O. Box 942

Pinckney MI 48169