



Mitchell Rotary Soap Box Derby Race
Lions Park, William Street Hill, Mitchell Ontario

Drivers' Profile

Drivers Name: _____

Nickname: _____

Age (on July 1, 2026) _____

Division: _____

Car Number: _____ Car Nickname: _____

Race History: _____

Civic Address: _____

City: _____ Postal Code: _____

Email Address: _____

Release Form

I, _____ am allowing my child _____, to participate in the Soap Box Derby, and do hereby release the Rotary Club of Mitchell, car inspection volunteers and race volunteers from any liability.

I, and my child, will abide by the rules and regulations of the operation of the Soap Box Derby. Also, in consideration for allowing my child to participate in the Soap Box Derby I hereby give, release and discharge the Soap Box Derby, my written permission to discharge or publish all photographs, video, and written material in which above named minor appears in and/or have written, while participating in the Soap Box Derby event.

I further agree that the Soap Box Derby may transfer, use or cause to be used, these photographs, video, and written material for any and all exhibitions, public displays, publications, commercials, art, and advertising purposes, without limitation or reservation or any compensation, other than a receipt of which is hereby acknowledged.

Parent/Guardian: _____

Signature: _____ Date: _____

Print off parental consent form and bring the form race day with a birth certificate.

Registration on Wednesday July 1, 2026, top of the hill William Street come in by Nelson Street.

I have my own soap box.

- Yes
- No

I am requesting use of one of the loaner soap box cars.

- Yes