

# Parent Permission/Authorization and Team Registration Form

## Parent Section:

FEE \$7.00 [Payable to Your Pack]

Cub Scout's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Age: \_\_\_\_\_

## STATEMENT

I (We), the parents of the above named Cub Scout, hereby give my (our) consent for my (our) son to participate in the Scouting event, the Cubmobile Derby. I (We) absolve Southern Auto Auction, the leaders of Pack 89, and the judges of any personal liability resulting out of this event. I (We) understand that this event involves my (our) son in the racing of a "homemade" Cubmobile and my (our) son's involvement is strictly my (our) decision. My (our) child has no medical restrictions that would inhibit him from participating in this event.

\_\_\_\_\_  
Parent or Legal Guardian Signature

\_\_\_\_\_  
Date

## Pack Section:

Team Leader: \_\_\_\_\_ **required** Team Number: \_\_\_\_\_ Pack Number: \_\_\_\_\_  
(assigned by each Pack – we no longer use Den numbers)

Pack Contact Name, telephone # and/or email address: \_\_\_\_\_  
(In case of questions)

Please mail completed forms and your check [**one per Pack**] payable to **Pack 89** to:

EW Pack 89  
PO Box 682  
Broad Brook, CT 06016

***Remember, completed registrations are due by Monday, April 6, 2020.***

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The following is to be completed by the Race Committee.

Pre-Registration Date: \_\_\_\_\_ Racer Number: \_\_\_\_\_

# Parent Permission/Authorization and Team Registration Form

## Parent Section:

FEE \$7.00 [Payable to Your Pack]

Cub Scout's Name: USE SIMPLE BLOCK LETTERS - we must be able to read

Street Address: \_\_\_\_\_

Town: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Age: \_\_\_\_\_

## STATEMENT

I (We), the parents of the above named Cub Scout, hereby give my (our) consent for my (our) son to participate in the Scouting event, the Cubmobile Derby. I (We) absolve Southern Auto Auction, the leaders of Pack 89, and the judges of any personal liability resulting out of this event. I (We) understand that this event involves my (our) son in the racing of a "homemade" Cubmobile and my (our) son's involvement is strictly my (our) decision. My (our) child has no medical restrictions that would inhibit him from participating in this event.

Parent or Legal Guardian Signature

You assign Team #

Date

Your Pack #

## Pack Section:

Team Leader: \_\_\_\_\_

**required**

Team Number: \_\_\_\_\_ Pack Number: \_\_\_\_\_

(assigned by each Pack – we no longer use Den numbers)

Pack Contact Name, telephone # and/or email address:  
(In case of questions)

**REQUIRED - we must be able to read**

Please mail completed forms and your check [**one per Pack**] payable to **Pack 89** to:

Must be an adult from your pack

EW Pack 89

PO Box 682

Broad Brook, CT 06016

**Remember, completed registrations are due by Monday, April 6, 2020.**

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The following is to be completed by the Race Committee.

Pre-Registration Date: \_\_\_\_\_ Racer Number: \_\_\_\_\_