

**2010 Walden Soap Box Derby**  
A Sanctioned All-American Soap Box Derby Race

**Sponsor Information**

Sponsor Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-mail Address (required) \_\_\_\_\_

**Driver Information**

Driver Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Parent Information**

Parent Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-mail Address (required) \_\_\_\_\_  
Telephone # \_\_\_\_\_ Cell # \_\_\_\_\_

*My child is interested in participating in Walden's Soap Box Derby*  
 *My child has a sponsor(s)*  
 *My child does not have a sponsor*  
 *My sponsor/family will purchase our own All-American Soap Box Derby Kit*  
**Please e-mail or FAX this information to James Politi, Derby Director.**  
**[jcpoliti@hvc.rr.com](mailto:jcpoliti@hvc.rr.com) FAX # 845-778-2170**