

TEAM INFORMATION FORM

Please fill out and bring with you to package pick up.

All teams will be required to sign this fully completed form.

TEAM CAPTAIN NAME _____

RACE DAY CONTACT # _____

VOLUNTEER NAME: _____

VOLUNTEER LOCATION/ TIME: _____

VEHICLE #1 LICENSE PLATE: _____

VEHICLE #2 LICENSE PLATE _____

- I have read and understood all race day rules, regulations. I understand that if any of our H2H team is caught breaking any of these rules, our team will be disqualified.
- I understand the location of our team volunteer. I will be sure to pass along all pertinent information regarding time/ location and description to our team volunteer. I understand that if our team volunteer fails to show up for their posted position, our team will be disqualified.
- I understand that my H2H race number must be posted in both vehicles windshield throughout the entire H2H event.

Printed Name

Signature