



# **GT XC JUNIOR CHALLENGE** **REGISTRATION**

NAME: \_\_\_\_\_  
(so we can read it please)

TOWN: \_\_\_\_\_ STATE: \_\_\_\_\_ CELL PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

D/O/B: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ RACING AGE: \_\_\_\_\_ (As of 12-31-21)

TEAM NAME / SPONSORS: \_\_\_\_\_

PLEASE CIRCLE CLASS BELOW:

**U10 BOYS AND GIRLS COMBINED** (10 and Under)

**11-13 Boys**

**11-13 Girls**

**14-15 Boys**

**14-15 Girls**

**16-18 Boys**

**16-18 Girls**

**11-18 Elite Boys**

**11-18 Elite Girls**

**ADULTS SIGN HERE:** \_\_\_\_\_

**STOP!** BELOW TO BE FILLED OUT BY REGISTRATION STAFF ONLY **STOP!**

Plate Number: \_\_\_\_\_

Chip Number: \_\_\_\_\_

PLEASE NOTE: *You are also required to fill out an express assumption of risk waiver form.  
If you are under the age of 18 your parents must be present to sign!  
No exceptions allowed.*