

Office Use Only:
Dues Paid: ___/___/___
T-shirt received: ___/___/___

YOUTH GRAND PRIX SERIES ENTRY FORM

\$5 Entry Fee (Make checks payable to Rochester Track Club)

Send completed form to: **Kristin Sorenson 719 19th Ave SW Rochester, MN 55902**

Name _____

Address _____

City _____ State _____ Zip _____

Phone () _____ - _____ Email _____

Birth date ___-___-___ Age ___ Gender M F

T-shirt size: Adult sizes: S ___ M ___ L ___ XL ___

Kid sizes: S ___ M ___ L ___ XL ___

NOTE: Additional t-shirts may be purchased at the price of \$5.00 each.

Participant Signature _____ Date _____

Parent Signature (if participant is under 18) _____

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