



# ADULT RACE REGISTRATION FORM

Team Name: \_\_\_\_\_

Team Captain: \_\_\_\_\_

Captain's Phone: \_\_\_\_\_ email: \_\_\_\_\_

Team Members:

Shirt Size: (circle one)

Driver: \_\_\_\_\_ SM MED AL AXL XXL XXL

Team:

1. \_\_\_\_\_ SM MED AL AXL XXL XXL

2. \_\_\_\_\_ SM MED AL AXL XXL XXL

3. \_\_\_\_\_ SM MED AL AXL XXL XXL

4. \_\_\_\_\_ SM MED AL AXL XXL XXL

Registration fee is \$75. Please make checks payable to the Bay Springs Chamber of Commerce.

*By Signing below, I affirm the I have read, understood, and agree to all rules and regulations for the HammerHead 500 race.*

Signature: \_\_\_\_\_ date: \_\_\_\_\_

Signature: \_\_\_\_\_ date: \_\_\_\_\_

Signature: \_\_\_\_\_ date: \_\_\_\_\_

Signature: \_\_\_\_\_ date: \_\_\_\_\_

Signature: \_\_\_\_\_ date: \_\_\_\_\_

**Please mail check and completed form to:**

**Bay Springs Chamber of Commerce**

**PO Box 702**

**Bay Springs, MS 39422**

**Thank you for your support of the Bay Springs Chamber of Commerce.**

For registration and event info visit: [HAMMERHEADARMOR.COM](http://HAMMERHEADARMOR.COM)

Questions? Contact 855-HHTOUGH or [BAYSPRINGSCHAMBER@GMAIL.COM](mailto:BAYSPRINGSCHAMBER@GMAIL.COM)

