**KOBUK 440 RACING ASSOCIATION**

TAAQPAK 120 ENTRY FORM

NAME

MAILING ADRESS

PHONE#

AGE

SS#

HOW MANY DOGS

YEARS MUSHING:

LEADERS:

SPONSORS:

PERSON (S) KOBUK 440 RACING ASSOCIATION CAN CONTACT CONCERNING DROPDOGS (WE NEED AT LEAST ONE)

NAME HS# PHONE #

NAME HS# PHONE #

LIST ANY RACE YOU HAVE COMPETED IN THE PAST FEW YEARS AND YOUR FINISHING POSITION:

I UNDERSTAND THAT I WILL NOT HOLD THE KOBUK 440 RACING ASSOCIATION RESPONSIDLE FOR ANY INJURY, OR LIFE THREATENING SITUATION I MAY FIND MYSELF OR MY DOG TEAM IN. I

ENTER THIS RACE WITH THE FULL KNOWLEDGE THAT I AM PARTICIPATING IN THIS EVENT OF MY OWN FREE WILL.

 MUSHER'S SIGNATURE WITNESS