



The Great Pumpkin Race 2020
 Ocean City Maryland
 On the Boardwalk at North Division Street
 Official Entry Form-Please read carefully



Name of Pumpkin Race Car _____

Describe any interesting features or facts about Pumpkin Race Car _____

Name (of Race Car Driver) _____

Race Division (Please circle one) JUNIOR ADULT

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Race Team Name (if any) _____

Race Team Members (if any) _____

Be sure to read important race rules and regulations. Please note, in consideration of your participation in The Great Pumpkin Race you agree to follow all laws, rules and regulations and further agree that you and race team members are participating at your own will and risk and are responsible for your own actions and will hold harmless all event organizers and event staff including but not limited to the Town of Ocean City, Special Event Productions, Inc., T.E.A.M. Productions LLC. You further agree to give permission to the use of any names that appear on the form along with the use of any photos of the same that may be taken for publicity and/or advertising.

Signature _____ Date _____

Parent/Guardian Signature (if under 18) _____ Date _____

Parade Officials Use:		
DIVISION: _____	ENTRY #: _____	RACE CAR: _____
ELIMINATED: _____	PLACE: _____	AWARD: _____