

# Relay Team Vehicle Registration Sheet

*A valid license must be shown for all drivers at check-in.*

*Please plan to take care of submitting driver and vehicle registration information on Friday at packet pickup, if possible. This will save time for you and for event officials. This takes place from 5-8 pm at Wyndham Garden State College, 310 Elks Club Rd., Boalsburg, PA 877-999-3223.*

Team Name \_\_\_\_\_ Capt. Name \_\_\_\_\_

Vehicle Lic No. \_\_\_\_\_ State \_\_\_\_ Make / color \_\_\_\_\_

Cell phone number(s) \_\_\_\_\_

Driver Name: \_\_\_\_\_ Official Use Only  
Lic verified \_\_\_\_\_

Additional Driver: Name \_\_\_\_\_ Lic verified \_\_\_\_\_

Additional Driver: Name \_\_\_\_\_ Lic verified \_\_\_\_\_

Additional Driver: Name \_\_\_\_\_ Lic verified \_\_\_\_\_