



Presented by:  
Kiwanis Club of Macon, Georgia

Saturday, September 28, 2024 - 8:00 am - 3:00 pm  
Martin-Whitley Educational Complex  
2003 Riverside Drive, Macon, GA 31204

### REGISTRATION FORM

**Please return the registration and liability forms as well as copies of your insurance card and a copy of your child's learner's permit or license.**

**Submission by:** Scan & E-Mail: [MaconKiwanis@gmail.com](mailto:MaconKiwanis@gmail.com) or by FAX: 478-301-2276

For more information, please e-mail [MaconKiwanis@gmail.com](mailto:MaconKiwanis@gmail.com) or check out <http://MaconTeenDrivingRoadeo.com>. You will receive an e-mail confirmation after submitting the completed forms.

Students Name: \_\_\_\_\_

Students E-mail: \_\_\_\_\_

High School: \_\_\_\_\_ Grade Level: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent's/Guardian's Name: \_\_\_\_\_

Parent's Guardian's E-Mail: \_\_\_\_\_

Home address: Street: \_\_\_\_\_ City: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Emergency Contact: (name and phone) \_\_\_\_\_ Will the

participant have his/her driver's license or permit by the time of this event? (please circle) **License** or **Permit**

T- Shirt size (please circle) **SM MED LG XLG XXLG**

#### RELEASE OF LIABILITY / PARENTAL PERMISSION

My child \_\_\_\_\_ has my permission to participate in the Teen Driving Roadeo. By signing below, I am indicating that the registration information is accurate. I understand that any misrepresentation of the registration information may disqualify my child for any prizes. I will inform Macon Teen Driving Roadeo committee of any changes.

I understand my son/daughter will be asked to operate a motor vehicle under controlled conditions on a maneuverability course. I also understand that my son/daughter will be taking part in traffic safety learning stations.

I do maintain insurance for a liability bond on my vehicle. I agree to release the organizers and all parties involved from any liability in the event of injury or damage caused by mechanical failure of any vehicle or by my child not following the rules or instructions given by the monitors. I also agree to accept responsibility for the actions of my child while participating in the event.

I give permission to use photos of my child for event promotion.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

Name and phone number of your insurance company or agent \_\_\_\_\_

**Please include a copy of your automobile insurance card and a copy of your child's license or Permit.**