

# Registration

Return completed registration form to:

“Delco Race Series”  
Healthplex Sports Club  
194 W. Sproul Rd.  
Springfield, PA 19064

## Registration Form

Please note: This form registers you for the Delco Race Series, not for any of the individual races involved with the series.

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

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (day): \_\_\_\_\_

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

Age (as of 9/30/06): \_\_\_\_\_

Sex:  M  F

***DON'T BE LAST...  
REGISTER TODAY!***

