

**IVSBA RACE DAY PROGRAM
Soap Box Derby Driver Questionnaire**

Return to Mark Wensel by May 10th, 2024

Gender: Male Female

Name _____ Age _____

Address _____

Parents' names _____

School _____ Grade _____

Sponsor _____

Raced before? _____ When _____

Did you place? _____

Tell us about your car _____

Why do you like to race? _____

How do you plan to win? _____

Other comments _____

Phone number _____

Other interests _____

PLEASE SEND A PHOTO OF YOUR DRIVER FOR MARK WENSEL
Send Form & Photo to Mark Wensel by May 10th, 2024
Email to mwensel@gmail.com