

**PLEASE PRINT!**

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Yrs. Competing: \_\_\_\_\_

Check or money order must accompany this form and be received by this office before **February 6, 2010.**

Please check event(s) you wish to enter:

- |                              |                              |
|------------------------------|------------------------------|
| Men's Stock Chainsaw _____   | Axe Throwing _____           |
| Women's Stock Chainsaw _____ | One-man Bucking _____        |
| Standing Block Chop _____    | Woman's Single Bucking _____ |
| Jack & Jill Sawing _____     | Two-Man Sawing _____         |
| (Partner _____)              | (Partner _____)              |
| Jill & Jill Sawing _____     | Modified Chainsaw _____      |
| (Partner _____)              | Underhand Chop _____         |
| Open-Modified Chainsaw _____ | Springboard _____            |

**Resume':** Past events entered and won, job background, etc.:

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**CONTEST WAIVER: I SIGN THIS WAIVER OF CLAIM AGAINST KLONDIKE DAYS, INC. AND SUPER SPRINTS, INC. FOR PERSONAL INJURY, OR DAMAGE TO MY EQUIPMENT DURING THE CONTEST, OR AS A RESULT OF COMPETING IN SAME. I WILL ACCEPT THE DECISIONS OF THE CONTEST OFFICIALS AS FINAL.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

1-4 events \_\_\_\_\_ X \$7.00 = \_\_\_\_\_  
 5 or more \_\_\_\_\_ X \$6.00 = \_\_\_\_\_

Please remit to: Klondike Days  
 Attn: Alex Bildeaux, Sr.  
 7227 - A Viking Blvd. N.E.  
 Wyoming, MN 55092

If you have any questions please feel free to contact Alex or Sue @ #651-462-3443.