

Registration Form



Thank you for participating in the inaugural running of the Eastside Baby Corner **Diaper Derby!**



Company Name: _____

Business Address: _____

Contact Person: _____

Contact Phone: _____

Contact E-mail: _____

Total number of employees (full-time & part-time) FT: _____ PT: _____

Weekly Racing Results

Teams are required to bring all diapers collected throughout the week to the **Eastside Baby Corner Hub** before 3pm each **Friday** during the Derby. Contact Christine White two days in advance to schedule your drop off time. Please appoint a representative responsible for taking the donations in each week.

By 5:00pm every Friday, you will receive an email with the team track position and progress. Results will also be posted on the EBC Facebook page and your horse will be moved on the large track at the EBC Hub.

I grant Eastside Baby Corner the right to take photographs of me and representatives of my company in connection with EBC Diaper Derby 2017. I authorize Eastside Baby Corner to use and publish these images in print and/or electronically.

Signature: _____ Date: _____

Please complete and sign this form by May 3, 2017 and return to Christine White, Associate Annual Fund Officer. If possible, please include your company logo in the highest resolution available.

christinew@babycorner.org • 425.865.0234 ext. 705 • Physical location: 1510 NW Maple St in Issaquah • Mailing: PO Box 712 Issaquah, WA 98027