



Driver Entry Form

Sit-down, propane forklift competition

Register at:
www.regonline.com/blue_mountain16



Pendleton Convention Center • Pendleton ► Monday, June 6, 2016

Driver Name _____

Company _____

Address _____

City _____ State _____

Phone _____

E-mail _____

Team Entry: Are you also a member of a three-driver team? **Yes** **No**

List other team members: _____

Teams of three must be determined prior to the event with a limit of two teams from a location. Driver changes are allowed prior to check-in. Team score is derived from the three individual scores.

Entry deadline May 20, 2016 – Event limited to 35 drivers

Once registered, you will receive the **Driver Application Packet** via e-mail. Packet includes:

- Driver biography form
- Waiver
- Proof of operator training from your employer
- Study questions for "Safe Forklift Operation" quiz (quiz administered onsite)

A 25-question quiz will be administered at the event and is not a pass-fail exam; however, participants will receive a one point demerit for each incorrect answer.

NOTE: Forklift operators must be competent to operate the truck safely (as determined by their employer). The proof of operator training should be a photocopy of the employer's documentation showing the operator was trained and evaluated to operate the forklift safely.

Completed Driver Packet due May 31, 2016

Entry fee is \$50 per person (*lunch on Monday included*)

Payment must accompany registration form.
 Make check payable to:

Blue Mountain Conference
PO Box 5640
Salem, OR 97304-0640

– **OR** – **Fax** form with credit card information
 to **503-947-7019**

Check-in on June 6, 2016 begins at 7 a.m. and closes at 7:45 a.m. at the Pendleton Convention Center. All drivers must complete a quiz and attend the driver's orientation at 8 a.m. Starting times will be chosen by drawing a number and assigned to each driver after check-in is completed. The event begins at 8:30 a.m.

Questions?

Contact Mark Ribich at **253-204-5979**
 or e-mail markribich@centurylink.net

Charge \$ _____ to my: MasterCard VISA American Express Discover

Name on card: (print) _____

Phone number: (_____) _____

Exp. date: _____ Security code _____ { 3 digits on back of Mastercard or VISA
4 digits on front of American Express

Signature: _____

Office use only

Date Rec. _____

Amt. Rec. _____

Check # _____

Last 4 _____

Credit card#:

For your protection, your credit card number will be shredded after processing.