Paid	P/S Cert	Local Certificate	Driver's License

2025 OFFICIAL ENTRY FORM OHIO SCHOOL BUS DRIVER SAFETY ROAD-E-O

Driver's Name:	Driver's License Number:		
School District:		_ Contractor Name:	
Home Address:		Cell Phone:	
City/State:	Zip:	E-mail:	
Shirt Size:			
If driving on a team, list your members:			
Check what type of bus you wish to compete in:	(check only	y one)	☐ Transit
DRIVER(S) MUST MAIL, ALONG WITH	REGISTRA	ATION FORM. COPIES OF	THE FOLLOWING:

DRIVER(S) MUST MAIL, ALONG WITH REGISTRATION FORM, COPIES OF THE FOLLOWING: C.D.L., Pre-Service Certificate, and District School Bus Driver Certificate

- A TWENTY DOLLAR (\$20.00) REGISTRATION FEE MUST ACCOMPANY THIS ENTRY FORM.
- ALL ENTRANTS MUST BE REGISTERED AND PAID 7 DAYS PRIOR TO THE ROAD-E-O.
- THERE WILL BE NO REGISTRATION OR MONEY COLLECTED THE DAY OF THE EVENT.
- YOU WILL NEED TO SHOW YOUR DRIVER'S LICENSE THE DAY OF THE ROAD-E-O.

RELEASE

In consideration of my being permitted to participate in the **Ohio School Bus Driver Safety ROAD-E-O** and to be eligible for awards offered to participants, I hereby stipulate and agree to the following terms and conditions:

- 1) Both as to myself and heirs and personal representatives, I release the Ohio School Bus Safety ROAD-E-O and all its officials or representatives from any damage or injury which I may receive from attending or participating in said event.
- 2) The Ohio School Bus Driver Safety ROAD-É-O or its assigns shall have the right to use any photographs taken of me in connection with the event.
- 3) I will be bound by all rules and regulations governing the Ohio School Bus Safety ROAD-E-O while participating in said event.

Signed thisday of		20	-	
School Official or Contractor:	Signature		Printed Name:	
Driver's Signature:			Printed Name:	

PLEASE SEND THIS FORM AND \$20.00 (\$20.00 IS NON-REFUNDABLE)
PLEASE MAKE CHECKS PAYABLE TO: "STATE SCHOOL BUS DRIVER ROAD-E-O COMMITTEE"

Mail to: ACESC School Bus Road-E-O
Attn: Joe Dietrich
1920 Slabtown Road, Lima, OH 45801