



# Olde Home Day

## Bed Races Rules & Registration

September 8, 2023 from 6:00 to 7:30pm



**Gather your friends, co-workers, or neighbors and create a Bed Race Team. Join in on this fun annual event. Don't have a team? Make plans to cheer the teams on.**

- Entry to Bed Race is \$40.00 per team. (*No payment is necessary until August 1, 2023*).
- Bed Race course & pit staging area located on Union & Walnut Street intersection.
- Bed size must be a minimum 3ft wide & 6ft in length, mattress, headboard & footboard. Only twin, full, queen or king beds are accepted. (no cribs/ bunkbeds)
- Bed must have 4 wheels, wheel size is not regulated.
- Motorized assistance is prohibited.
- Person riding/driving in bed **MUST** wear a helmet at all times. (Please provide your own helmet).
- Bed Race team must consist of a 5-member team: 4 members dressed in costume pushing & 1 member in costume/on bed w/helmet.
- All teams are encouraged to decorate/theme their Bed Race entries representing your business, trade or team spirit.
- Push handle / bars are allowed, but NOT to exceed 18" from bed frame. (no jagged or sharp edges please... padding is allowed & encouraged)
- During the race, bed **MUST** maintain the specified course; intersection of Union & Walnut Street to Corcoran House.
- Beds not completing in the full course will be disqualified.
- All 5 team members **MUST** be with bed upon crossing the finish line.
- **All team members 18 & over MUST sign "2023 Bed Race Waiver & Release Form" prior to race.**
- **Applicants 13-17 require parent/guardian consent. No exceptions.**

Race Questions? Email: [oldehomeday@clintonma.gov](mailto:oldehomeday@clintonma.gov)  
Please note our new email address.



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Team members **MUST** sign "2023 Bed Race Waiver & Release Form" prior to race.  
Visit <https://www.clintonma.gov/210/Olde-Home-Day-Committee> for forms.

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

Team Captain's Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Email \_\_\_\_\_

Team Member 2 Name / Age \_\_\_\_\_

Team Member 3 Name / Age \_\_\_\_\_

Team Member 4 Name / Age \_\_\_\_\_

Team Member 5 Name / Age \_\_\_\_\_

Mail Registration Entry Form & Fee to:

Clinton Olde Home Days Committee  
c/o Clinton Town Hall  
242 Church Street  
Clinton, MA 01510

Race Questions: Email: [oldehomeday@clintonma.gov](mailto:oldehomeday@clintonma.gov)

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Date Fee Received \_\_\_\_\_

Check # \_\_\_\_\_

Amount \_\_\_\_\_