# *ENTRY FORM*

Please read carefully!!

***NATIONAL EVENT***

***LINDSAY, ONTARIO JANUARY 23/24, 2010***

***R4***

Bib #

First Name Last Name Contact Phone #:

Address: Postal/Zip Code

**Classes: Refer to description of classes in Newsletter #1**

***Enter the last 4 digits of your race sled VIN # for each class***

| ***Trailsport Div. (1st year Adults)*** | | Sat. | Sun. | ▼VIN# |
|---|---|---|---|---|
| Trailsport 500 | $45 x | | | |
| Trailsport 600 | $45 x | | | |
| Trailsport 600 Women | $45 x | | | |

| ***Specialty Division*** | | Sat. | Sun. | ▼VIN# |
|---|---|---|---|---|
| Junior 1 (14-15 yrs) | $35x | | | |
| Junior 2 (16-17 yrs) | $35x | | | |
| Junior Girls (14-17) | $35x | | | |
| Junior F1 (13-17) | $35x | | | |
| Junior F2 (14-17) | $35x | | | |
| Novice 1 (10-11yrs)380cc | $35x | | | |
| Novice 2 (10-13yrs)600cc Fan | $35x | | | |
| Novice Girls(10-13)600cc Fan | $35x | | | |
| Novice A 8-10 300cc | $35x | | | |
| Novice B 11-13 300 cc | $35x | | | |
| Stock 120 4-9 yrs | $25x | | | |
| Imp. Stock 120 (4-9yrs) | $25x | | | |
| Modified 120 (7/8/9 yrs) | $25x | | | |
| Vintage 1 | $35x | | | |
| Vintage 2 | $35x | | | |
| Vintage Open Fan | $35x | | | |
| Vintage Open Liquid | $35x | | | |

| ***Sport Division*** | | Sat. | Sun. | ▼VIN# |
|---|---|---|---|---|
| Sport 500 | $45 x | | | |
| Sport 600 | $45 x | | | |
| Sport Women | $45 x | | | |
| Sport Veteran (30+) | $45 x | | | |
| Sport Masters (40+) | $45 x | | | |

| ***Semi Pro Division*** | | ▼VIN# |
|---|---|---|
| Semi Pro Stock | $85 x | |
| Semi Pro Open | $85 x | |

| ***Pro Division*** | | ▼VIN# |
|---|---|---|
| Pro Stock | $160 x | |
| Pro Open | $160 x | |
| Pro Women | $85 x | |
| Pro Veteran (30+) | $85 x | |
| Pro Masters (40+) | $85 x | |

| | |
|---|---|
| ***Total Entry Fees*** | |
| ***Weekend Membership Fee (75.00)*** | |
| ***ADD: 5% GST (12506 3099 RT)*** | |
| ***Mandatory Ambulance/Medic Fee (120 and Vintage excluded)*** | ***$25*** |
| ***LATE FEE*** | |
| ***Total Fees Due =*** | |

***Entry fees must be paid in full BEFORE you will be allowed to practice or race!***

Method of Payment: Visa:____ Mastercard:____

***No Refunds unless event is cancelled.***

Cardholders Name: _____

Credit Card Number: _____

Expiry Date: _____ Signature:

By signing, I authorize CSRA/Avann Racing Inc to charge the above credit card.

MUST BE FAXED TO OFFICE NO LATER THAN JANUARY 19,2010
AFTER THIS DATE A $50 LATE FEE CHARGE WILL BE ACCESSED.
FAX TO 905-722-3188