



REGISTRATION

June 19 – 20, 2010 at IMI

DRIVER INFORMATION: REGISTRATION DEADLINE WED, JUNE 16, 2010 (ADD 10% TO FEES AFTER 6/16)

Driver Name: _____ Age: _____ DOB: _____
If driver is under 18, a valid birth certificate must accompany this form

Address: _____

City: _____ State: _____ Zip: _____

Day Phone/Cell: _____ Evening Phone/Home: _____ Email: _____

Required for electronic confirmation of processed entry. We will not spam or sell your information.

EMERGENCY INFORMATION:

Contact Person: _____ Relation: _____

Phone: _____ Alternate Phone: _____

Insurance Company: _____ Blood Type: _____

Allergies or Medical Conditions: _____

RACE ENTRY INFORMATION: Race Entry Fees, Transponders, and SKUSA Memberships are mandatory.

Class(es) Entered – Select Appropriate Class:

S1 S2 S3 S4 S5
 JR1 Tag Jr. Tag Sr. Tag G1
 Open Open Weight, Tires, Fuel
Run What You Brung

Transponder # _____ SKUSA Membership# _____

Specify Engine Make Specify Engine Builder
 Specify Chassis Specify Team Name

RACE NUMBER:

Primary Alternate 1 Alternate 2

PAYMENT TOTAL: Deadline 6/16/10

RACE ENTRY FEES

GOLD ENTRY:
 Entry fee, 2 day driver wrist band, (1) - pit, (1) set of tires, 5 gallons fuel, (1) liter oil
 _____ X \$290.00/Each \$ _____

SILVER ENTRY:
 Entry fee, 2 day driver wrist band, (1) – pit, (1) set of tires
 _____ X \$245.00/Each \$ _____

BRONZE ENTRY:
 Entry Fee, 2 day driver wrist band, (1) pit
 _____ X \$ 75.00/Each \$ _____

PAYMENT INFORMATION:

MC _____ VISA _____ DISCOVER _____ EXP DATE _____

Credit Card Number: _____

Cardholder Name: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Email Address to Send Receipt: _____

EXTRAS

Pit Passes:
1 Day \$10.00/each
 Sat. _____ x Sun _____ x \$ _____
 2 Day _____ x \$15.00/Ea. \$ _____

Tires (tax included):
 _____ x \$220.00/Set \$ _____

Race Fuel:
 MS 98 Fuel (5 gallons - tax included)
 _____ x \$70.00/Each \$ _____

Race Oil:
 Motul (tax included):
 _____ x \$20.00/Each \$ _____

One Day Membership:
 _____ X \$25.00/Each \$ _____

SIGNATURE:

X _____

I have read and understand the information contained on this entry form. I also hereby authorize the following charges to be made to my credit card.

Fax completed entry form to: 303.814.8012
 Mail to: P. O. Box 1204, Eastlake, CO 80614
 Contact SKUSA Mountain Region at 720.335.5278 with any questions.

GRAND TOTAL:

\$ _____

SKUSA Membership Required
 1 Day Membership - \$25.00,
 Annual Membership - \$75.00
 Apply Annual Membership www.superkartsusa.com