

RACER REGISTRATION FORM Date: October 5, 2024 Race: Wendover Lukcy Chance 250 Class: Race Car # **SXSide** Big Engine Pro Sportsman N/A Pro Turbo Pro **Truck** Trophy Class 6100 Class 7 Class 8 Mini Sportsman Car Class 1 Class 5 Class 10 Class 11 Class 12 Class 1600 Class 4500 Class 6200 Sporstman Other: PRO (Payback, 5 laps) SPORTSMAN (No Payback, 3 laps) **Color Scheme:** Race Team: Race Radio Freq: MHz Main Pit Cell #: **Driver of Record** Last Name First Name Birth Date **Email Address** Sex Street Address State City Zip Medical Allergies/Conditions Phone **Emergency Contact Name** Phone Signature/ Date Co-Driver #1 Last Name First Name **Email Address** Birth Date Age Sex Street Address City State Medical Allergies/Conditions Phone **Emergency Contact Name** Phone Signature/ Date Co-Driver #2 Last Name First Name Email Address Birth Date Age Sex Street Address City State Zip Medical Allergies/Conditions **Emergency Contact Name** Phone Signature/ Date Co-Driver #3 Last Name First Name Email Address Birth Date Age Sex Street Address City State Zip Medical Allergies/Conditions Phone

Co-Driver #4 Last Name First Name Email Address Birth Date Age Sex Street Address City State Zip Medical Allergies/Conditions Phone **Emergency Contact Name** Phone Signature/ Date

Phone

Emergency Contact Name

Signature/ Date