ENTRY FORM **NATIONAL EVENT**

Please read carefully!!

GEORGIAN DOWNS RACEWAY, INNISFIL FEB. 18/19

Weekend Member			Rescheduled R3 & R4
			Mylaps

Racer# | | | |

First Name	Last Name	Age	Transponder # (MUST BE 7 DIGITS)

City	Province	Sled Brand

Email:		Contact #

Classes: Refer to description of classes in Newsletter #1

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

Specialty Division

Trailsport Div. (1st year Adults)		**Sat.**	**Sun.**
Trailsport 1 (600cc trail sleds onl	$50 x		
Trailsport 600	$50 x		
Trailsport 600 Women	$50 x		
		Sat.	**Sun.**
Junior 1 (14-15 yrs)	$45x		
Junior 2 (16-17 yrs)	$45x		
Junior Girls (14-17)	$45x		
Junior F1 (13-17) (1st year JRS)	$45x		
Junior F2 (13-17)	$45x		
Junior/Novice (10-13yrs)	$45x		
Transition (8-12) 600cc	$45x		
Transition Girls (8-13) 600cc	$45x		
Novice A 8-10	$45x		
Novice B 11-13	$45x		
Novice 250cc (7-13 yrs)	$45x		
120 Stock 1 (4-6 yrs)	$35x		
120 Stock 2 (6-10 yrs)	$35x		
120 Briggs Improved (6-8 yrs)	$35x		
120 Briggs Improved (9-12 yrs)	$35x		
120 Champ (7-12 yrs)	$35x		
Snow Bike	$45x		

Specialty Division		**Sat.**	**Sun.**	▼VIN#
Pro/Am Women (18+ years old)	$50 x			
Pro/Am Vets (30+ years old)	$85 x			
Sport Division(Adults 18yrs and over)				
Sport 1 600	$50 x			
Sport 2 600	$50 x			
Pro Division				▼VIN#
Pro Lite	$85 x			
				▼VIN#
Pro	$85 x			
Pro Open	$150 x			

Transponder Rental Fee @ $30 _____

Total Entry Fees _____

Transponders Required for ALL CLASSES except Stock 1 and 2 of 120's

Mandatory Ambulance/Medic Fee (120 and Vintage excluded) ***$25***

Mandatory Insurance Fee (all racers) ***$25***

Weekend Membership Fee (75.00) _____

120 Weekend Membership Fee (25.00) _____

Membership #:

CSRA	
ISOC	
ECS	
SCMX	

Subtotal _____

ADD: 13% HST (12506 3099 RT) _____

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. 3 digit code on back:_____

MUST BE FAXED TO OFFICE NO LATER THAN MONDAY FEB. 13/17 AFTER THIS DATE A $50 LATE FEE CHARGE WILL BE ASSESSED. **FAX TO 905-722-3188 or 1-866-533-1435**	LATE FEE APPLIED