



ENTRY FORM

Please read carefully!!

ANNUAL ENTRY FORM

(For Annual Members ONLY!)

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

Table with columns: Class, Sat., Sun.
120 Stock 1 (4-6 yrs) \$35x
120 Stock 2 (6-10 yrs) \$35x
Pro 206 1 (6-7yrs) \$35x
Pro 206 2 (8-10 yrs) \$35x
Champ (6-12 yrs) \$35x
Transition 1(8-10 yrs) \$45x
Transition 2(11-13 yrs) \$45x
Transition Girls (8-13 yrs) \$45x
Novice 200cc (6-12 yrs) \$45x
Junior/Novice 1 (10-13yrs) \$45x
Junior/Novice 2 (13-15yrs) \$45x
Junior 1 (14-15 yrs) \$45x
Junior 2 (16-17 yrs) \$45x
Junior Girls (14-17) \$45x
Trailsport 600 \$50 x
SnowBike \$45 x

- R1- Rouyn-Noranda Practice @ \$50
R1- Rouyn-Noranda Saturday
R2- Rouyn-Noranda Sunday
R3- Barrie Saturday
R4- Barrie Sunday
R5- Valcourt (see below)
R6- Lindsay Saturday
R7- Lindsay Sunday
R8- Timmins Saturday
R9- Timmins Sunday
R10- Kitchener Saturday
R11- Kitchener Sunday
R12- Horseshoe Friday
R13- Horseshoe Saturday
R14- Horseshoe Sunday

Tick boxes of events you will be attending. You will be charged before each entry closing date

R5- Valcourt enter directly with Grand Prix de Skidoo Valcourt

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

Specialty Division
Pro/Am Women (18+ years old) \$50 x [] [] [] []
Pro/Am Vets (30+ years old) \$75 x [] [] [] []
Sport Division (Adults 18yrs and over)
Sport 1 600 \$50 x [] [] [] []
Sport 2 600 \$50 x [] [] [] []
Pro Division
Pro Lite \$85 x [] [] [] []
Pro \$150 x [] [] [] []

Total Entry Fees for Weekend []
Transponders Rental @ \$30 for weekend []
Mandatory Ambulance/Medic Fee (excludes 120 racers) 25.00
Mandatory Insurance Fee (all racers) 25.00
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 THE MONDAY PRIOR TO FIRST RACE ATTENDING
FAX TO 905-722-3188 or 1-866-533-1435
LATE FEE APPLIED