



Race Date: _____ (Check Just One Class per Form)

- | | | |
|--|--|---|
| <input type="checkbox"/> Micro ROK | <input type="checkbox"/> Junior ROK | <input type="checkbox"/> Junior ROK Shifter |
| <input type="checkbox"/> Mini ROK | <input type="checkbox"/> Senior ROK | <input type="checkbox"/> Senior ROK Shifter |
| <input type="checkbox"/> 80 Masters | <input type="checkbox"/> Master ROK | <input type="checkbox"/> Master ROK Shifter |
| <input type="checkbox"/> Senior VLR & KA 100cc | <input type="checkbox"/> Master VLR & KA 100cc | |
| <input type="checkbox"/> 125 Shifter Limited | | |

DRIVER'S Name: _____ Kart# _____

(MAKE CHECKS PAYABLE TO CAMERON RACE PROMOTIONS) Transponder # _____

Entry Fee: w/o Transp \$110 _____

125 Shifter Limited \$0 _____ w/o Transp

Entry for 2nd Class \$75 _____

Transponder Rental Fee \$15 _____

Pit Passes Adult _____ x \$10 _____

Pit Passes Child _____ x \$5 _____ (Kids under 12)

Saturday Practice \$60 _____

Bridgestone Tires *inc tax*
(\$235/Cadet \$250/Full) _____

VP C12 Fuel - 5 gal *inc tax* **\$85** _____

Motul 2t Oil, 1 liter *inc tax* **\$21** _____

For Office Use Only

Check # _____

Cash: _____

Sub-Total \$ _____

Credit Card (last 4) _____

Credit \$ _____

Taken by: _____

Total \$ _____

DRIVER INFORMATION - TO BE FILLED OUT ONCE FOR THE SEASON

ADDRESS: _____

CITY _____ STATE: _____ ZIP: _____

AGE: _____ DATE OF BIRTH (if under 18) _____ PHONE: _____

EMAIL ADDRESS: _____

EMERGENCY CONTACT: _____ PHONE: _____

DO YOU HAVE MEDICAL INSURANCE? _____ IF SO, WHO WITH? _____