

JAMES' RACE ENTRY FORM

NAME: _____
AGE: _____ PHONE # _____
ADDRESS: _____ CITY: _____
STATE/PROV: _____ EMAIL: _____

ASSOCIATION MEMBERSHIP:
AASBD # _____ NDR: # _____ CSBRA # _____

RACING DIVISIONS:

CSBRA DIVISIONS:

HOBBY STREET HOBBY PRO

OFFICIAL DERBY DIVISIONS:

STOCK SUPER STOCK SENIOR

DISCLAIMER:

By signing this entry form I waive all claims against the CSBRA, NDR, AASBD, ODRA, all event organizers/workers and the City of Peterborough, for the loss or damage to personal property. I also waive all claims against the above mentioned for injuries that may occur as a result of my participation in this event.

signature: _____
(Guardian/parent for all racers under 19 yrs of age)

Entry Fee: \$25.00

ENTRY FEES: May be made with a cheque or money order to be returned with this entry. Return your entry and fees payable to **Donna Daynes/James' Race:**

mail to: **JAMES' RACE**

c/o Donna Daynes

1100 Hilliard St C-8

Peterborough Ontario K9H 5S2

