

2020 REGIONAL TEST DAY ENTRY FORM

Please enclose payment with registration form and mail or fax to:
Canadian Motorsport Ventures Ltd.

3233 Concession Rd. #10, Bowmanville, Ontario Canada L1C 3K6
Phone: 905-983-9141 Fax: 905-983-5195

E-mail: info@ctmpark.com Web Site: www.canadiantiremotorsportpark.com

Team Name/Owner: _____ Phone: _____

Address: _____ City: _____ Postal Code: _____

Email Address: _____

Car Make: _____ Model: _____ No: _____ Colour: _____

Driver's Name(s) _____ Race License _____

In Case Of Emergency Contact: _____ Phone: _____

Address: _____ City: _____ Postal Code: _____

Special Price : Pay for all four days prior to April 1st and pay only \$1,000.00

**All prepayments MUST be received or post-marked prior to dates noted

PLEASE NOTE: WE DO NOT ISSUE REFUNDS

TEST DAY	\$300 on or before:	\$350 on or before:	\$400 after:
May 8	April 24 <input type="checkbox"/>	May 1 <input type="checkbox"/>	May 1 <input type="checkbox"/>
July 24	July 10 <input type="checkbox"/>	July 17 <input type="checkbox"/>	July 17 <input type="checkbox"/>
September 18	September 4 <input type="checkbox"/>	September 11 <input type="checkbox"/>	September 11 <input type="checkbox"/>
October 2	September 18 <input type="checkbox"/>	September 25 <input type="checkbox"/>	September 25 <input type="checkbox"/>
All prices include HST. HST # 819709312			TOTAL

Please check one of the following: (please make cheque payable to "Canadian Motorsport Ventures Ltd.")

Cash: Cheque: M/C: Visa: DD:

Account Number: _____ Exp. Date: _____

Signature: _____ CVC # (last 3 digits) _____

**All Drivers must sign the waiver form at gate and wear proper helmets and appropriate apparel.
All vehicles must be safe and track worthy and are the sole responsibility of the owner/driver.**

**On test day, participants must go to the Registration Centre(located to the right of the Main Gate)
to register (if they have not already), sign-in, and receive their test day sticker**

**Canadian Tire Motorsport Park will hold Test Days prior to major events
Call for details!**

Date Received	Processed By	Authorization No