

2019 ICE RACE ENTRY FORM CASC-OR SUBARU ICE RACE CHAMPIONSHIP

ICE RACE ADVISORY #'S 416-667-9500 877-667-9505	Jan 19/20 Jan 26/27 Feb 2/3 Feb 9/10 Feb 16/17 Feb 23/24 Mar 2/3 Round 1 Round 2 Round 3 Round 4 Round 5 Round 6 Mar9/10 DAC TLMC BARC BEMC TAC PMSC RAIN	CLASS No.
	TYPE OR PRINT ALL INFORMATION	
NOVICE? YES <u>NO</u> NO	a novice during the full season of her/his first ice race.	
DRIVER'S CASC-OI	R REGISTERED ICE RACE ROOF NUMBER	OFFICIAL USE ONLY
NAME:	CLUB	COMP. LICENCE OK DRIVER'S LICENCE OK 2 ND SHEET IF 2 CLASSES
ADDRESS:		2 SHEET IF 2 CLASSES
CITY	POSTAL CODE PHONE:	SATURDAY AND SUNDAY ONE CLASS \$ 160.00
COMPETITION LICEN	NCE NO: ISSUED BY:	TWO CLASSES \$ 320.00
CAR MAKE:	MODEL:	SATURDAY ONLY
YEAR:	Email	ONE CLASS \$ 90.00 TWO CLASSES \$ 180.00
	IN EMERGENCY PLEASE CONTACT:	SUNDAY ONLY
NAME :		ONE CLASS \$ 70.00 TWO CLASSES \$ 140.00
PHONE:	AT THE TRACK ? YES NO	ALSO PAID FOR:
CLASSES ENTERED {	Write in class number}	CAR No Class CAR No Class
SATURDAY CLASS _	OTHER CLASS	CAR No Class
SUNDAY CLASS	OTHER CLASS	CAR No Class
I am familiar with the CASC this Event and agree to abio and Crew and guests nomir	OR PAID BY: CAR No Class	
them and be bound by ther enter and compete in the C	TOTAL PAID \$	

I HAVE READ THE PRECEDING PARAGRAPH {Please sign in registration}

further agrees that the Entrant, Driver, guests, and all Crew members shall each execute a waiver and release of liability

Date: _____ Signature: _____

agreement prior to and as a condition of their admission to the Competition.

SIGNED

\$ RECEIVED AND ENTRY COMPLETED

CASH _____ CHEQUE ____

OFFICIALS ONLY

DRIVER No.