

# **ENTRY FORM**

# October 6-8, 2006

| Entry Fee:<br>\$500 US (Canadians at par) if received by Sept. 23<br>Add Late Fee of \$100 after Sept. 23 | \$<br>\$ | Make checks payable to:  Lewis County Chamber of Commerce  Mail checks and entry forms to: |
|---|----------|--|
| Total Enclosed  | \$       | Black River Stages Rally C/O Keith Kreisler 228 Riverview Road                             |
| Includes Jemba prepared Route Notes and entry in awards party for team and crew.                          | to the   | Rexford, NY 12148  |
|   |          |  |

|   | ENTRANT | DRIVER | CO-DRIVER |
|---|---------|--------|-----------|
| Team Name   |         |        |           |
| Last Name   |         |        |           |
| First name  |         |        |           |
| NASA Membership #   |         |        |           |
| Nationality (as Passport)   |         |        |           |
| Postal address  | 1.      | 2.     | 3.        |
| Indicate address where <b>ALL</b> correspondence is to be sent (Circle 1, 2, <b>or</b> 3) |         |        |           |
| Telephone No. (business)  |         |        |           |
| Telephone No. (private)   |         |        |           |
| Mobile Telephone No.  |         |        |           |
| Fax No.   |         |        |           |
| E-mail Address  |         |        |           |
| Team Website Address  |         |        |           |
| Competition License No.   |         |        |           |
| Type of License<br>(FIA, NASA, USAC, etc.)  |         |        |           |
| Issuing ASN (FIA/Internt'I)   |         |        |           |
| Driving License No.   |         |        |           |
| Country of Issue  |         |        |           |

#### **DETAILS OF THE CAR**

| 2== 0                   |                   |  |  |  |  |
|-------------------------|-------------------|--|--|--|--|
| Make                    | Registration No.  |  |  |  |  |
| Model                   | C.C.              |  |  |  |  |
| Year of Manufacture     | Body No.          |  |  |  |  |
| Group / Class           | Engine No.        |  |  |  |  |
| Homologation No.        | Predominant Color |  |  |  |  |
| Country of Registration | Logbook No.       |  |  |  |  |



## **ENTRY FORM**

## October 6-8, 2006

#### **SEEDING INFORMATION**

| Driver_   | Oriver          |   |                  |          |                 | Speed Factor      |                     |  |  |
|-----------|-----------------|---|------------------|----------|-----------------|-------------------|---------------------|--|--|
| Car       |                 |   | _ Group / Class  |          |                 |                   |                     |  |  |
| FIA Prio  | ority A YE      | S / NO FIA Pri  | ority B YES / NO |          |                 |                   |                     |  |  |
| Previous  | s FIA, Regior   | nal, or National Seed YES / N                                       | NO               |          |                 |                   |                     |  |  |
| If yes, R | tegion          |   | Year             | Se       | ed              | Priority          | /                   |  |  |
| Champi    | onship Winne    | er? YES / NO  |                  |          |                 |                   |                     |  |  |
| If yes, n | ame Champi      | onship  |                  |          | Year            | Place_            |                     |  |  |
|           | Year            | Event   | Car              | Group    | O/A<br>Position | Class<br>Position | No. of<br>Finishers |  |  |
| Internt'I |                 |   |                  |          |                 |                   |                     |  |  |
|           |                 |   |                  |          |                 |                   |                     |  |  |
| National  |                 |   |                  |          |                 |                   |                     |  |  |
| Other     |                 |   |                  |          |                 |                   |                     |  |  |
|           |                 |   |                  |          |                 |                   |                     |  |  |
|           | •               | ncy, contact:   |                  |          | Phone           |                   |                     |  |  |
| For Co-   | -Driver         |   |                  |          | Phone           |                   |                     |  |  |
| List any  | y medical co    | onditions we should be award  | e of:            |          |                 |                   |                     |  |  |
| Driver_   |                 |   |                  |          |                 |                   |                     |  |  |
|           |                 |   |                  |          |                 |                   |                     |  |  |
|           |                 | ACKNOV  | VLEDGEMENT AI    | ND AGREE | MENT            |                   |                     |  |  |
|           | nditions relati | I declare that all the information of to my participation in this e |                  |          |                 |                   |                     |  |  |
| For Entr  | ant             |   | Name/Title       |          |                 | Date              |                     |  |  |
| -         |                 | Signature   |                  |          |                 |                   |                     |  |  |
| Driver_   |                 |   | Co-Driver        |          |                 | Date              |                     |  |  |
|           |                 | Signature   |                  | Sign     | ature           |                   |                     |  |  |

# BLACK RIVER STAGES SERVICE CREW AND VEHICLE REGISTRATION FORM

**DRIVER NAME CO-DRIVER NAME** CAR# SERVICE CREW \* All crew members must sign the waiver. \* List all crew members below. Additional names may be added at Registration. Crew Chief \_\_\_\_\_\_ Name \_\_\_\_\_ Address Address City/State/Zip\_\_\_\_\_ City/State/Zip\_\_\_\_\_ Phone \_\_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_ Address Address City/State/Zip\_\_\_\_\_ City/State/Zip Phone Phone Name \_\_\_\_\_ Name \_\_\_\_\_ Address Address City/State/Zip\_\_\_\_\_ City/State/Zip\_\_\_\_\_ Phone \_\_\_\_\_ Phone **SERVICE VEHICLE(S)** Vehicle 1 Lic # / State\_\_\_\_\_ Policy #\_\_\_\_\_ Vehicle 2 Make Model Year Color Lic # / State\_\_\_\_\_\_ Insurer\_\_\_\_ Policy #\_\_\_\_\_ Will these vehicles service for any additional teams?\_\_\_\_\_ If so, list all car numbers\_\_\_\_\_ **INSURANCE WARRANTY** DOCUMENTATION SHOWING LIMITS MUST BE SHOWN AT REGISTRATION I warrant that all service vehicles have current minimum liability insurance coverage of \$100,000/\$200,000/\$50,000 which meets or exceeds the vehicle insurance standards established and required by NASA. Vehicle 1 Owner Signature

Vehicle 2 Owner Signature