

Kambusters Drag Racing

Pre-Registration Drag Racing Form

Name (Last, First, M): _____

Drivers License #: _____ Age: _____

Address: _____

City: _____ Prov, State: _____

Postal/Zip Code: _____ Country: _____

Spouse/Partner/Parent/Guardian:

Phone Number: Home:(____)_____ Work:(____)_____

E-Mail: _____

Vehicle Information

Vehicle Year, Make & Model: _____

NHRA / IHRA Class and Number:

Engine Make: _____ Cubic In: _____ H. P. _____

Best ET: _____ Best MPH: _____

Pre Drag Race Registration

Send payment to Kambusters with a completed form:

_____ \$50.00 This payment includes only car and driver.

_____ \$25.00 Test and Tune (Prior day to main event)

I agree to abide by the Bylaws & Operating Guidelines of the **Kambusters Drag Racing Assoc.** I release **Kambusters Drag Racing Assoc.** and the **City of Yorkton** from any liability that may result from any accident or injury incurred while participating or attending any Association Race or Social Event.

Signed: _____

Parent/Guardian _____ Date: _____

(If under 18 years of age, Parent/Guardian must sign & something participants form)

THANK YOU FOR BEING PART OF THE EXCITING SPORT OF DRAG RACING.