

**2018 Number Registration Form
Summer Road Race Series
Thompson Speedway Motorsports Park**

Number Registration Fee: \$50

Mail to: Thompson Speedway, Attn: Summer Road Race Series, PO Box 278, Thompson, CT, 06277
Email: therrien@thompsons Speedway.com *Phone:* (860) 923-2280

Make checks payable to Thompson International Speedway LLC

Registrant Information

Name: _____ Date: _____
Last First MI

Street: _____

Town: _____ State: _____ Zip: _____

Date of birth: _____ Phone: _____

Email: _____

Competition Lic. Org: _____ Lic. Number: _____ Exp. Date: _____

Car Information:

Make: _____ Model: _____ Color: _____

Car Number: _____ / _____ Transponder #: _____

Group (Small Bore, Big Bore or Open Wheel): _____

Emergency Contact Information:

Name: _____ Phone: _____

Relationship: _____ At the track: _____

2018 Number Registration Fee

Payment methods accepted: Cash, credit card, or check.

CC Number (if applicable): _____ **Exp Date:** _____
Security Code: _____

Driver Signature: _____ Date: _____

Official Use Only

Registration Fee paid on: _____ **Payment Method:** _____

Group(s): _____ / _____ Class: _____ / _____ Number: _____ / _____
