



Avenal Sand Drags Inc.

Avenal, California

Vehicle # _____ Vehicle Name _____ Vehicle Type _____

Driver's Name: _____

Street Address or PO Box:		
City:	State:	Zip:
Phone:	Emergency Contact:	
Vehicle Owner (if different from above):		Emergency Phone:
Email address:		

** Information above is used for the Mailing List so please print legibly **
 ** One form per car **

	Saturday	Sunday
_____ Top Fuel \$150.00	_____ Pro Gambler (Cars ONLY) \$75.00	_____ Pro 1 (3.10-3.74) \$100.00
_____ Top Alcohol \$150.00	_____ S1 (3.50-4.50) \$50.00	_____ Pro 2 (3.75-4.25) \$100.00
_____ Top Eliminator (2.95 index) \$150.00	_____ S2 (4.51-6.00) \$50.00	_____ Pro 3 (4.26-slower) \$100.00
	_____ S3 (6.00 - Slower) \$50.00	_____ MP1 (4.49 & faster) \$100.00
	_____ MS1(4.49-faster) \$50.00	_____ MP2 (4.50-6.10) \$100.00
	_____ MS2(4.50-slower) \$50.00	_____ Juniors \$25.00

* By paying admission and/or entry fees, the participant and/or guardian acknowledge and accept full responsibility for any consequences or injuries that may arise, and hold harmless the Avenal Sand Drag Inc, staff and volunteers. Race at own risk!

Participant/Guardian Signature _____ **Total Entry** _____
 (If writing a check please make it payable to Avenal Sand Drag INC. or ASDI):

Sponsor/Thanks to: _____

Money Received by: _____ / Date _____

Receipt # _____