



SIDECAR PRE- ENTRY FORM
Please print clearly and legibly:



Track: _____ **Date:** _____, 20

The Team Captain and all Riders must have a current ASRA or CCS Competition License form on file.

Team Competition #: Captain's Member #: - Captain's SRA #:

Team Captain:

Passenger:

Address:

City: State:

Zip: Day Phone #:

E-mail: _____ Transponder #:

You may remit by Credit Card, check, or money order in US Funds. If you wish to charge your entries, fill out the Credit Card information below.

CREDIT CARD INFO: -MASTERCARD -VISA -DISCOVER EXP DATE: -

CARD NUMBER: - - - CVN#

CARD ISSUED TO:

You can only register one team per form.

Category	Classes	Comp #	Brand	CC	Fees
SIDE					\$140
CAR					

READ THIS RELEASE

RELEASE AND ASSUMPTION OF RISK: I, hereby release, and agree to hold harmless the Championship Cup Series, ASRA Championship Series, American Sportbike Racing Association L.L.C., HD Promotions, Loudon Road Race Series, New Hampshire Motor Speedway Inc., Daytona International Speedway LLC, United States Grand Prix Riders Union, Mid-Atlantic Road Race Club, Midwest Cafe Racing Association, Learning Curves Road Race School, Penguin Racing School, Longevity Racing School, Team Hammer Inc., the promoters, the owners and lessees of the premises, the participants, and the officers, directors, officials, representatives, agents and employees of all of them, of and from all liability, loss, claims and demands that may accrue from any loss, damage or injury (including death, loss of limbs and permanent disablement) to my person or property, in any way resulting from, or arising in connection with this event, and whether arising while engaged in competition or in practice or preparation therefore, or while upon, entering or departing from said premises, from any cause whatsoever, I know the risk and danger to myself and property while upon said premises or while participating or assisting in this event, so voluntarily and in reliance, upon my own judgment and ability, I thereby assume all risk for loss, damage or injury (including death, loss of limbs and permanent disablement) to myself and my property from any cause whatsoever.

AGREEMENT: By my signature below, I hereby agree to the terms of the above release and further agree to abide by the current CCS/ASRA Road Race Rules and Regulations and any Special Regulations in all participation with this license. I hereby agree to allow my likeness to be used for promotional purposes by the Championship Cup Series and the ASRA Championship Series without any further compensation to myself. I hereby agree to surrender a complete unedited copy of any and all video to ASRA/CCS immediately upon request. I certify that I have received a copy of the current CCS/ASRA Road Race Rules and Regulations and that the above information regarding my age, identity, and experience is true and freely given for the purpose of competing in this event:

CAPTAIN'S SIGNATURE: _____.

FAX OR MAIL TO: ASRA – 9928 Peregrine Trail, TX 76108 Fax 817-246-2977