

Motorcycle Vehicle#: _____
 Class: _____ / _____ / _____
(If Known) Frame / Engine CC / Stroke

Date: _____

Car Vehicle#: _____
 Class: _____ / _____
(If Known) Engine / Body

ENTRY NAME _____

OWNER(S) NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

PRI. Driver _____ License Cat. ____ ALT. Driver _____ License Cat. ____

ALT. Driver _____ License Cat. ____ ALT. Driver _____ License Cat. ____

CAR

ENGINE year and type: _____

CID/cc _____ No. of Cylinders _____ Gas Fuel Blown Naturally Aspirated Turbo

BODY year, make and model: _____ Color: _____

Other Info: _____

MOTORCYCLE

ENGINE year and type: _____

CC: _____ No. of Cylinders _____ Volts: _____ Gas Fuel Blown Naturally Aspirated Turbo

FRAME year and model: _____ Color: _____

Other Info: _____

*** RELEASE ***

I, the undersigned, in consideration of the timing facility and privileges extended to me, hereby agree in behalf of myself, my successors and assigns, that I recognize and assume all risk of damage, injury and death that may be caused by a failure of any component of my car and shall accept full and entire responsibilities for any and all consequences, injuries, property damage, or otherwise that may arise from the operation of my vehicle operated by me in any race, timing event or other contest or event conducted by the ECTA, LLC, and/or its members; and I hereby, in behalf of myself, my successors and assigns, release, covenant not to sue, and waive any and all legal liability and/or cause of action that I may now have or thereafter acquire against the ECTA, LLC, or any of its members, sponsors, affiliates and all persons and companies that have or might assist in the operation of the events or anyone employed or acting as timers, judges or any other capacity in conducting such races and/or timing events at Blytheville, AR or any other location. I understand that all forms of motor sports are dangerous and can result in death. I am of sound mind, and I accept all of these risks.

 Owner's Signature

 Primary Driver's Signature

 Alter. Driver's Signature

 Alter. Driver's Signature

 Alter. Driver's Signature

ECTA USE ONLY

1. Day _____	Time _____	Class _____	DR/RR _____	Fee \$25 _____	Cash / Check / CC _____	Initials _____
2. Day _____	Time _____	Class _____	DR/RR _____	Fee \$25 _____	Cash / Check / CC _____	Initials _____
3. Day _____	Time _____	Class _____	DR/RR _____	Fee \$25 _____	Cash / Check / CC _____	Initials _____
4. Day _____	Time _____	Class _____	DR/RR _____	Fee \$25 _____	Cash / Check / CC _____	Initials _____
5. Day _____	Time _____	Class _____	DR/RR _____	Fee \$25 _____	Cash / Check / CC _____	Initials _____

Pre-Entry Track Entry \$ _____ Membership \$55 Total Pd: _____ Cash / Check / CC Initials _____