



Team Entry Form

Sunday, November 14, 2010

8:30am-5:30pm

Team Name: _____

Team Members:

Driver #1: _____ T-Shirt: 2XL XL L M S

Email: _____

Driver #2: _____ T-Shirt: 2XL XL L M S

Email: _____

Driver #3: _____ T-Shirt: 2XL XL L M S

Email: _____

Driver #4: _____ T-Shirt: 2XL XL L M S

Email: _____

All drivers must be a minimum of 18yrs of age. Spectators welcome!

To secure your Team's spot in the 2nd Annual RASAR 500 email your completed registration form to info@rasar.ca or fax to 905-854-3637.

Confirmation of Team registration will be completed upon receipt of all Registration fees. Fees Deadline is: Monday, October 18, 2010.

For more information, please contact Trevor Harness or Lex Anderson at 905.854.5837 or by email at tharness@rasar.ca.

The Applicant consents on his/her behalf and on behalf of the individuals named in the Application, if any, to the collection, use and disclosure by RASAR of the personal information contained in the Application for the purposes of administration and marketing of the Race and of RASAR, and to provide the individuals on the Application with the information relating to RASAR and other events which may be of interest to such individuals.

Team Captain's Signature: _____

Date: _____



