



2019 EVE OF DESTRUCTION
Saturday, September 14th
TRAILER RACE

ENTRY FORM

PLEASE PRINT LEGIBLY

DRIVER'S NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: (____) _____

AGE: _____ DATE OF BIRTH: _____ / _____ / _____

- ENTRY FEE: **\$25.00**
- Entry Fees are NON-REFUNDABLE
- Entry Fees may be paid by Cash, Money Order or Check. (There will be a \$25.00 fee for Returned Checks)
- Entry Fee includes One (1) Pit Admission for the DRIVER ONLY.

I have read the rules and regulations of the Eve of Destruction Trailer Race and agree to abide by them, accept the official's decision as final and elect to use the track in its present condition.

Driver's Signature: _____ Date: _____

Car #: _____ Entry Fee Paid: \$ _____ Cash M/O Check # _____

Processed By: _____

Do Not Write in Spaces Below – Office Use Only



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DRIVER'S NAME: _____

Entry Fee Paid: \$ _____ Cash Money Order Check # _____

Car #: _____ Processed By: _____

*Please return completed entry form to: OCFS c/o Trailer Race Entry 239 Wisner Avenue Middletown, NY 10940