

Lost Valley

Budweiser Corporate Racing League

Team Registration Form

Team Name: _____	
Team Captain: Name: _____	Phone: _____ Work: _____
Address: _____	Age: _____
1. Name: _____	Phone: _____ Work: _____
Address: _____	Age: _____
2. Name: _____	Phone: _____ Work: _____
Address: _____	Age: _____
3. Name: _____	Phone: _____ Work: _____
Address: _____	Age: _____
4. Name: _____	Phone: _____ Work: _____
Address: _____	Age: _____
5. Name: _____	Phone: _____ Work: _____
Address: _____	Age: _____
6. Name: _____	Phone: _____ Work: _____
Address: _____	Age: _____
7. Name: _____	Phone: _____ Work: _____
Address: _____	Age: _____
8. Name: _____	Phone: _____ Work: _____
Address: _____	Age: _____

Evening Race fee \$10.00 (includes 6-9PM Ticket) Minimum age 21

Team Fee \$150.00 (on or before December 15th)

Race Night Sign In 5:45pm – 7:00pm

Racing Between 6:00pm and 8:00pm

<i>For Office Use only:</i>	Fee Paid: _\$ _____	Date Received: _____	By: _____
-----------------------------	---------------------	----------------------	-----------