



This form must be completed in its entirety. If you have mailed in or paid online, you MUST pick your form up at the registration area. If paying at the track, you may print and complete this form before arriving to save time.

Tech Number

Everyone must pay the gate fee (\$5) and receive an armband before entering the track area.

2010 MCRA Challenge Series Registration:

Sun, May 23 Sat, Jun 12 Sat, Aug 14 Sun, Oct 10

Race Class (select one):

GT - combined CCS GTO and GTU class structure

GT LIGHTS - CCS GT Lights class structure

SPORTSMAN CLASS - New to Racing

Competition Level (select one):

EXPERT - CCS White plate

AMATEUR - CCS Yellow plate

Rider Full Name: _____

Address: _____

City, State, Zip: _____

Phone (Home): _____ (Cell): _____

Email: _____

Emergency Contact (Name): _____

(Phone): _____

Motorcycle (Year, Make, Model, Size): _____

If your bike is pre-numbered, what is your number? _____ (Example: Y234 = Yellow 234)

***** PRICING *****

Registration (Payment MUST be postmarked 20 days before the Race Day date. Mail early!)

___ \$ 55 - 1 Race Date selected ___ \$165 - 3 Race Dates selected

___ \$110 - 2 Race Dates selected ___ \$220 - 4 Race Dates selected

I wish to be placed at the back of the grid.

To register by mail, print and send completed form & payment to:

MCRA Challenge Series, P.O. Box 16591, St. Louis, MO 63105

MAIL EARLY! It must be postmarked 20 days before the event date. Postmark date will determine grid positions.

Online Registration & Payment (PayPal): www.mcraracing.com

NOTE: Safety equipment required : FULL RACE GEAR. Full Leathers or Aerostitch type suit with either one piece or zip-together two-piece design, Full-Face Helmet, Leather Boots and Gauntlet Style Gloves. ALL bikes and equipment MUST pass an on-site safety/tech inspection before being permitted on the track. This is a RAIN or SHINE event. NO REFUNDS. I have read/understand the Rules and Regulations of racing and agree to comply with any guidelines, decisions or determinations made by the MCRA Race Official.

By completing this form I agree that I have read the [Track Day Handout](http://www.mcraracing.com/documents/TDhandout.pdf) and agree to comply with any guidelines for track day usage. <http://www.mcraracing.com/documents/TDhandout.pdf>

(Office use only – to be completed by registration official)

Race Licensed Checked _____

MCRA Membership Checked _____

Rider Name: _____

Time: _____

Amount Paid: \$ _____ .00 Paid By: Cash Check # _____

Recorded by: _____

Take this form to The track. It MUST be used for registration and turned into the tech inspector.

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Series

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