NAME:					West Central Trailblazers		
ADDRESS:							
CITY/STATE/ZIP CODE:							
PHONE NUMBER:					_		
EMAIL ADDRESS:					_		
BIB #:							OBILE CLUB
AGE:					7.5		NOBILE LLUB
MAKE OF SLED:	ARCT	IC CAT	POLARIS	SKI DOC	УАНАНА	OTHE	ER:
<u>STOCK</u>		<u>IMPI</u>	ROVED STOCK		MODIFIED		<u>VINTAGE</u>
AIR COOLED		AIR	COOLED		_ AIR COOLED		0-340 LEAF SPRING
500		500			500		341+ LEAF SPRING
600		600)		600		
700		700)		_700		
800		800)		_800		
OPEN		OP	EN		OPEN		
					_OPEN TURBO		
	ı			l		ı	
IF PARTICIPANT IS UN SON/DAUGHTER OR I VOLUNTARILY ELECT WAIVE, DISCHARGE, A	NAMED I	MINOR WI	HO I AM LEGAL O	GUARDIAN IURY, DEAT	OF, TO COMPETE I H OR DAMAGE TO	IN THE ABO	OVE NAMED EVENT. I
DRIVER'S SIGNATURE	:						_
PARENT/GUARDIAN S	SIGNATU	RE:					_

\$10.00 FOR 1 PASS

OR

\$20.00 FOR 3 PASSES