OFFICIAL ENTRY FORM

21st Annual Southern MN Spring Challenge Deer Creek Speedway Spring Valley, Minn. Saturday, May 25, 2024



USMTS Rules apply. All drivers must draw each day prior to the drivers meeting. Qualifying will be done through heat race passing points and "B" Mains. Typically, the top 12 or 16 in passing points are locked into the "A" Main. The top 8 redraw and 12 or more advance from the "B" Main(s). RACEceivers and AMB transponders are mandatory and available for rent.

ENTRY FEE: \$175 by May 24 or \$225 on raceday

Licensed: 1. \$5000, 2. \$3500, 3. \$2500, 4. \$2000, 5. \$1500, 6. \$1200, 7. \$1100, 8. \$1050, 9. \$1000, 10. \$975, 11. \$950, 12. \$940, 13. \$935, 14. \$930, 15. \$925, 16. \$920, 17. \$915, 18. \$910, 19. \$905, other starters \$900, non-qualifiers \$150.

Non-Licensed: 1. \$5000, 2. \$3000, 3. \$2000, 4. \$1500, 5. \$1000, 6. \$900, 7. \$850, 8. \$800, 9. \$775, 10. \$750, 11. \$740, 12. \$730, 13. \$725, 14. \$720, 15. \$715, 16. \$710, 17. \$705, other starters \$700, non-qualifiers \$150.

Enter online at **usmts.com/register** or call **(515) 832-7944**ONLINE REGISTRATION ADD \$10 SERVICE FEE
CREDIT CARD BY PHONE ADD 4% SERVICE FEE
NO REFUNDS

Support Classes: USRA Stock Cars and, USRA B-Mods.

TIMES

Pits Open 3 p.m. Grandstands Open 4 p.m. Drivers Meeting 5:15 p.m. Hot laps 5:30 p.m. Racing 6 p.m.

PRICES

Adults \$30
Seniors 65+ \$25
Students (13-17) \$25
Kids (12 & Under) FREE
Adult Pit Pass \$40
Student Pit Pass (6-15) \$20
Kids (5 & Under) FREE

21st Annual Southern MN Spring Challenge, Deer Creek Speedway, Spring Valley, Minn., Saturday, May 25, 2024By filling out and submitting this form indicating my entry for the event designated, I agree to abide by the rules and regulations of the USMTS and hosting racetrack. Furthermore, I understand there will be no refunds on entry fees. Checkthe box next to the class you're entering, complete the form, and then submit completed form.

ENTRY FEE: \$175 by May 24 or \$225 on raceday Driver's Name _____ Car # ____ Chassis _____ ______ City ______ State _____ Zip ______ Address _____ Home Phone (______) ______ Other Phone (______) ______ (Phone Type) Social Security or Tax ID # ________ Date of Birth _____/___/____(mm/dd/yy) Email Address ______ Website Address _____ ______Transponder # _____ If owner is different than driver, complete the following information: Owner's Name _______ Social Security or Tax ID # _____-__ _____City _____State ____Zip _____ Address _____ Make check payable to USMTS and mail to PO BOX 905, WEBSTER CITY IA 50595 For credit card purchases, please complete the following: NAME ON CARD______ CARD NUMBER_____ EXP DATE CARD TYPE (circle one): Visa / Mastercard CVC# (three-digit number on back of card)

ONLINE REGISTRATION ADD \$10 SERVICE FEE. CREDIT CARD TRANSACTIONS BY PHONE ADD 4% SERVICE FEE. NO REFUNDS