OFFICIAL ENTRY FORM

12th Annual USMTS Spring Shootout presented by LT Construction Mississippi Thunder Speedway Fountain City, Wis. Friday, May 24, 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 23 or \$225 on raceday.

Licensed: 1. \$5000, 2. \$3000, 3. \$2000, 4. \$1500, 5. \$1000, 6. \$900, 7. \$850, 8. \$825, 9. \$800, 10. \$775, 11. \$750, 12. \$740, 13. \$730, 14. \$725, 15. \$720, 16. \$715, 17. \$710, 18. \$705, other starters \$700, non-gualifiers \$120.

Non-Licensed: 1. \$5000, 2. \$2500, 3. \$1500, 4. \$1000, 5. \$800, 6. \$700, 7. \$600, 8. \$550, 9. \$500, 10. \$475, 11. \$450, 12. \$425, 13. \$420, 14. \$415, 15. \$410, 16. \$405, other starters \$400, non-qualifiers \$100.

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, USRA B-Mods, USRA Late Models, USRA Hobby Stocks.

TIMES

Pits Open 4 p.m. Grandstands Open 5 p.m. Hot laps 6:30 p.m. Drivers Meeting 6: 50 p.m. Racing 7 p.m.

GRANDSTANDS

Adults \$25 Seniors (65+) \$23 Student (13-17) \$5 Kids (12 & Under) FREE

PIT PRICES

Adults \$40 Student (6-13) \$15 Kids (5 & Under) FREE

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By 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 23 or \$225 on raceday. Driver's Name _____ Car # ____ Chassis _____ _____ City ______ State _____ Zip _____ Address ____ Home Phone (______) ______ Other Phone (______) ______ (Phone Type) Email Address ______ Website Address _____ _____Transponder # _____ Sponsor ____ 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 __ 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