



81 SPEEDWAY

PARK CITY, KANSAS

SATURDAY, NOVEMBER 16, 2019

MAIN EVENT PAYOUT: 1ST \$10,002 2ND \$5002
 3RD \$4002 4TH \$3002 5TH \$2502 6TH \$2202
 7TH \$2002 8TH \$1802 9TH \$1702 10TH \$1602
 11TH \$1502 12TH \$1402 13TH \$1302
 14TH \$1292 15TH \$1282 16TH \$1272
 17TH \$1262 18TH \$1252 19TH \$1242
 20TH \$1232 21ST \$1222 22ND \$1212
 OTHER STARTERS \$1202
 NON-QUALIFIERS \$152

LONG TOW: 1ST \$500 2ND \$400 3RD \$300 4TH \$200 5TH \$200

HEAT RACES: 1ST \$100 2ND \$75 3RD \$50 4TH \$25

ENTRY FEE IS \$125 EARLY OR \$150 AT THE GATE
 \$25 OF ENTRY BENEFITS THE GRANT JUNGHANS MEMORIAL FUND

RULES & PROCEDURES: ALL USMTS RULES APPLY. SEE COMPLETE RULES AT USMTS.COM. DRAW FOR HEAT RACE STARTING SPOT ENDS 15 MINUTES BEFORE HOT LAPS. QUALIFYING WILL BE DONE BY HEAT RACE PASSING POINTS AND "B" MAINS. RACEGIVERS AND AMB TRANSPONDERS ARE MANDATORY AND AVAILABLE FOR RENT OR PURCHASE AT THE USMTS RACE HEADQUARTERS. THIS IS A USMTS-SANCTIONED NON-POINTS EVENT. NO TOP DOG BONUS AWARDED. AMERICAN RACER TIRES ONLY ON SATURDAY.

LICENSES: THERE IS NO REQUIREMENT TO PURCHASE A USMTS LICENSE TO COMPETE IN ANY USMTS EVENT.

ENTRY FEES: THE ENTRY FEE FOR USMTS COMPETITORS IS \$125 ON OR BEFORE NOVEMBER 15 OR \$150 AT THE GATE ON RACE DAY. FROM EACH ENTRY FEE RECEIVED, \$25 WILL BENEFIT THE GRANT JUNGHANS MEMORIAL FUND WHICH SUPPORTS RESEARCH AND FUNDING FOR CHILDHOOD CANCER.

PROVISIONALS: PROVISIONALS FOR USMTS COMPETITORS WILL BE AWARDED TO THE TOP TWO (2) DRIVERS IN USMTS NATIONAL POINTS THAT FAIL TO QUALIFY FOR THE "A" MAIN AS PER USMTS RULES. THE HOSTING RACETRACK RESERVES THE RIGHT TO ADD ADDITIONAL PROVISIONALS.

MANDATORY DECALS: USMTS. AMERICAN RACER. CASEY'S. CP-CARRILLO. FAST SHAFTS. MVT AND SUMMIT.

4th Annual Grant Junghans Memorial • 81 Speedway, Park City, KS • Saturday, November 16, 2019

By filling out and submitting this form indicating my entry for the event(s) designated, I agree to abide by the rules and regulations of the USMTS and the hosting racetrack. Furthermore, I understand that there will be no refunds on any entry fees. Entry fees will be rain-checked for a future USMTS event.

Driver's Name _____ Car # _____ Class _____
 Address _____ City _____ State _____ Zip _____
 Home Phone (_____) - _____ - _____ Other Phone (_____) - _____ - _____ (Phone Type)
 Social Security or Tax ID # _____ - _____ - _____ Date of Birth ____/____/____ (mm/dd/yy)
 Email Address _____ Website _____
 Chassis _____ Engine Builder _____
 Sponsors _____

If owner is different than driver, complete the following information:

Owner's Name _____ Social Security or Tax ID # _____ - _____ - _____
 Address _____ City _____ State _____ Zip _____

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)