

# OFFICIAL ENTRY FORM

## 13th Annual USMTS Jayhawk Classic

Mel Hambelton Racing USMTS Central Region  
Lakeside Speedway - Kansas City, Kansas  
Friday, October 25, 2024



USMTS rules apply. All drivers draw for heat race starting spot 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 advance to the A-Main, the top 8 redraw, and then 12 or more advance from the B-Main(s). RACEceivers and AMB transponders mandatory and available for rent.

**ENTRY FEE \$175 BY OCTOBER 24 OR \$225 AT THE GATE**

**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-qualifiers \$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](http://usmts.com/register) or call (515) 832-7944**

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

**Track Configuration:** 4/10-mile high-banked dirt oval.

**Location:** 5615 Wolcott Dr, Kansas City, KS 66109.

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

### 13th Annual USMTS Jayhawk Classic, Lakeside Speedway, Kansas City, Kan., Oct. 25, 2024

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. Complete the form, and then submit your completed form.

**ENTRY FEE \$175 BY OCTOBER 24 OR \$225 AT THE GATE**

Driver's Name \_\_\_\_\_ Car # \_\_\_\_\_ Chassis \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Other Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ ( Phone Type )  
Social Security or Tax ID # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (mm/dd/yy)  
Email Address \_\_\_\_\_ Website Address \_\_\_\_\_  
Sponsor \_\_\_\_\_ Transponder # \_\_\_\_\_

*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)

NO REFUNDS. ALL CREDIT CARD TRANSACTIONS ADD 4% SERVICE FEE