

# OFFICIAL ENTRY FORM

## 6TH ANNUAL GRANT JUNGHANS MEMORIAL PRESENTED BY SHOP QUIK CONVENIENCE STORES LAKESIDE SPEEDWAY KANSAS CITY, KS FRIDAY, AUGUST 12, 2022

USMTS RULES APPLY. ALL DRIVERS MUST DRAW PRIOR TO DRIVERS MEETING. QUALIFYING WILL BE DONE THROUGH HEAT RACE PASSING POINTS AND B-MAINS. HEAT RACES WILL BE LINED UP BY GROUP QUALIFYING (TIME TRIALS) WITH BEST FOUR TIMES INVERTED FOR THE FIRST FOUR STARTING SPOTS IN THAT HEAT RACE WITH REMAINDER STARTING HEADS-UP. THE TOP 12 IN HEAT RACE PASSING POINTS WILL BE LOCKED INTO A-MAIN. THE TOP 8 WILL REDRAW AND AN ADDITIONAL 12 WILL ADVANCE FROM THE B-MAINS TO THE A-MAIN. RACECEIVERS AND AMB TRANSPONDERS ARE MANDATORY AND AVAILABLE AT SIGN-IN.



**PAYOUTS: 1. \$20,002, 2. \$10,000, 3. \$5000, 4. \$3000, 5. \$2500, 6. \$2000, 7. \$1700, 8. \$1500, 9. \$1300, 10. \$1200, 11. \$1100, 12. \$1070, 13. \$1050, 14. \$1030, 15. \$1020, 16. \$1010, OTHER STARTERS \$1002, NON-QUALIFIERS \$150.**

**USRA STOCK CARS \$1,002 TO WIN, \$152 TO START  
USRA B-MODS \$1,002 TO WIN, \$152 TO START**

**\$2 FROM EVERY ADULT TICKET AND \$5 FROM EVERY PIT PASS GOES TO  
THE GRANT JUNGHANS MEMORIAL FUND  
WHICH SUPPORTS RESEARCH AND FUNDING FOR CHILDHOOD CANCER  
[GRANTJUNGHANS.COM](http://GRANTJUNGHANS.COM) / DONATE**

### TICKETS

ADULTS \$30  
SENIORS 65+ \$25  
YOUTH 12-16 \$20  
11 & UNDER FREE  
SUITES \$40

### TIMES

PITS OPEN 4PM  
GRANDSTANDS 5PM  
HOT LAPS 7PM  
RACING AT 7:30 PM

### PIT PASSES

ADULTS \$45  
KIDS 6-10 \$30  
5 & UNDER FREE

### 6th Annual Grant Junghans Memorial, Lakeside Speedway, Kansas City, Kan., Aug. 12, 2022

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. Check the box next to the class you're entering, complete the form, and then submit completed form.



**Entry Fee \$250 before August 12**  
\$50 to Grant Junghans Memorial Fund



**Entry Fee \$300 on August 12**  
\$50 to Grant Junghans Memorial Fund

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)