

2012 W. C. H. A. Championship Hillclimb & Verticross Series

4-STROKE STOCK ENTRY and WOMEN/GIRL ENTRY

Name: _____ **W.C.H.A.#** _____ **Ex Date** _____ **Age on Jan. 1, 2012** _____
 (Required) (Required)

Address: _____ Phone: _____ Date _____

City/State: _____ Zip: _____

CLASSIFICATION
Expert Novice
 Circle One

Email _____

PLEASE PRINT CLEARLY—Highlighted areas must be completed

Please check all classes you are entering

THREE (3) BIKES MAKE A CLASS ON ANY OF THE CLASSES

4-STROKE ENTRY

STOCK 4-STROKE YOUTH

0-50cc UP TO 8 YEARS OF AGE
 \$40 PreEntry 51-100cc Up to 11 years of age
 \$50 PostEntry 101-125cc Up to 14 years of age

Make of Bike/Size _____

STOCK BIKES ONLY
TETHER REQUIRED

STOCK 4-STROKE

126-150cc
 \$40 PREENTRY 151-250cc
 \$50 POST ENTRY 251-450cc

THREE (3) BIKES MAKE A CLASS ON ANY OF THE CLASSES

WOMEN ENTRY

WOMEN 16 YEARS OF AGE AND OVER

0-150cc
 \$40. PreEntry 151-250cc
 \$50 PostEntry 251-450cc

Make of Bike/Size _____

2-STROKE OR 4-STROKE STOCK BIKES ONLY
TETHER REQUIRED

GIRLS ENTRY

Girls (15 years and under)

0-50cc UP TO 8 YEARS OF AGE
 \$40 PreEntry 51-150cc Up to 11 years of age
 \$50. PosEntry 151-250cc

Make of Bike/Size _____

2-STROKE OR 4-STROKE STOCK BIKES ONLY
TETHER REQUIRED

WAIVER OF LIABILITY

I acknowledge that there are risks and dangers involved in riding and participating in contest at SKIP'S AT CARNEGIE, INC & IT'S SUBSIDIARIES & CARNEGIE SVRA, INC. I hereby release, acquit, and forever discharge SKIP'S AT CARNEGIE, INC & IT'S SUBSIDIARIES & CARNEGIE SVRA, INC., their owner, lessor, officer, agents, employees, representatives, and all participants, who might be using SKIP'S AT CARNEGIE, INC & IT'S SUBSIDIARIES & CARNEGIE SVRA, INC. from any liability, claim, demands action or right of action whatsoever kind of nature in law or in equity, I may have or which may have or which may accrue in favor of me or my heirs executors, administrators, and representatives, or any of them in any way growing out of; resulting from or arising in connection with my presence on or in the use of SKIP'S AT CARNEGIE, INC & IT'S SUBSIDIARIES & CARNEGIE SVRA, INC., or properties or facilities provided for, operated or controlled by SKIP'S AT CARNEGIE, INC & IT'S SUBSIDIARIES & CARNEGIE SVRA, INC.. I hereby assume all risks of any liabilities, for damages to my person, injury or death, or my property while within the confines of the SKIP'S AT CARNEGIE, INC & IT'S SUBSIDIARIES & CARNEGIE SVRA, INC., however caused: whether caused by negligence or otherwise, and I hereby give consent whatever medical care might be provided or available on the premises. I also agree to conform and comply with all the rules and regulations of the SKIP'S AT CARNEGIE, INC & IT'S SUBSIDIARIES & CARNEGIE SVRA, INC. and promoters.

If under 18 Years of Age-Parent or Guardian must sign

 Signate Required

 Parent's Signature

Mail Entry with Cashier Check/Money Order
Visa - M/C - AmEx - Discover
Please circle Card Company

Card # _____ Expiration Date _____

Signature _____
 Required for credit card charges

MAIL TO: Skip's At Carnegie
P O BOX 1288 NEW ADDRESS
Twain Harte, CA 95383
Fax No. (209) 586-9308 (Credit Cards Only)

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