

**Event Entry Form**  
**MMR**  
**Trophy Kart World Cup**  
**Date Nov 7 & 8 2008**  
**Amount \$ 300**



\_\_\_\_ Date Rcvd  
 \_\_\_\_ Payment  
 \_\_\_\_ Race

Please send to: **MMR - PO BOX 8744 BREA, CA 92822 or Fax 714-415-5562**

**PARTICIPANT: One entry form is required for each driver. All MINORS MUST HAVE A PARENT OR GUARDIAN REGISTER AS AN AID TO PARTICIPANT. All drivers must have a Drivers Aid at the starting grid. (Regardless of age)**

**Participant Information** (please bring a copy of a birth certificate or passport)

JUNIOR 1    JUNIOR 2    CSK1    CSK2    ELITE HOT SHOT

Trophy Kart #    MMR Membership #   
(All participants at MMR events must be current MMR members)

Pit Stall Size Requested    Gallons of fuel requested

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Team Name \_\_\_\_\_

Address \_\_\_\_\_ City, State & Zip: \_\_\_\_\_

Cell Phone \_\_\_\_\_ Phone (2) \_\_\_\_\_ Email \_\_\_\_\_

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Height \_\_\_\_ Weight \_\_\_\_

Emergency contact name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Any allergies or medical conditions \_\_\_\_\_

**Aid to Participant Information**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Relation \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City, State & Zip \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Phone (2) \_\_\_\_\_ email \_\_\_\_\_

**Release of claims and liability**

*I agree to abide by the by-laws and regulations of this organization. I understand the release of claims & Liability & covenant not to sue form. The undersigned releases and holds harmless Mini Motorsports Racing, its related companies, partners and officers from any and all claims arising from the operation of any Trophykart / Elite / CSK or from participation in any Trophykart / Elite / CSK race or event. The undersigned specifically recognizes that the operation of a Trophykart / Elite / CSK can lead to great bodily harm or death and undertakes the operation of at the sole risk of the undersigned. The undersigned will not bring any action at law or bring any suit of any kind against Mini Motorsports Racing, its related companies, partners or officers.*

Participant signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent or Guardian signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_