

MODIFIED DRIVER ENTRY FORM 9TH ANNUAL ALL STAR CUP SHOOTOUT 100 (PLEASE PRINT & FILL OUT COMPLETELY)

IN CONSIDERATION of the grant of this Entry Form, I hereby release, indemnify, and save harmless the management promoters, and owners of New Egypt Speedway, their agents, and employees, of and from any and all liability, negligence or otherwise, and from any and all claims, suits, actions, and third parties, or otherwise while on the premises of New Egypt Speedway. By accepting this Entry Form, I expressly and contractually assume the rise of injury, including death, to myself or injury to my personal property while on the Speedway premises. I know racing activities may be dangerous for many reasons including high speed driving conditions of vehicles or the speedway property carelessness of other drivers, mechanics or spectators and the use of flammable explosives.

I do hereby certify that I have read and understand the above information and do hereby make application for New Egypt Speedway All Star Cup 100 Entry Form, signing the application and release with the intent to be legally bound hereby.

Driver's Name:			
Phone Number:			
Car Number:			
Mailing Address:			
City/Town:	State:	Zip Code:	
Driver's Social Security Number:			
Owner's Name:			
Owner's Address:			
Driver's Signature:	Date: _		

Entry Fee: \$50

Make checks payable to New Egypt Speedway, 720 Rt. 539, New Egypt, NJ 08533

**If you're entering two cars an entry form needs to be filled out separately for both cars.