

Jim Russell Karting Championship Series
Registration Form

Class: _____ **Race Date: October 2009**

Micro-Max _____ **Senior 80** _____
Mini-Max _____ **80 Masters/Heavy** _____
Junior Rotax _____ **80 Grand Masters** _____
Senior Rotax _____
Rotax Masters _____
Rotax Masters Light _____
Rotax DD2 _____

Driver's Name: _____ **Kart #:** _____

Chassis: _____ **Engine:** _____ **Transponder #:** _____

Fill Out Each Race

Address: _____

City: _____ **State:** _____ **Zip:** _____

Age: _____ **Date of Birth:** _____ **Phone:** _____

Email (if you are not on email list): _____

Emergency contact person: _____ **Phone:** _____

Do you have Medical Insurance? _____ **If so, who with?** _____

Entry Fee: (Russell Transponder) \$105 _____

Entry Fee: (Drivers Transponder) \$100 _____

Second class \$65 _____

ProShop Inv #: _____

Total \$ _____

Taken By: _____

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