

Challenge Cup

2020



Team Registration



PLEASE PRINT YOUR INFORMATION CLEARLY. The information you provide is distributed to the media and used by ACT, Seekonk, Star, Thunder Road and White Mtn. internally. Info can be updated in the future if details change. Please mail or fax completed form at your earliest convenience.

EMAIL ADDRESS REQUIRED: _____

DRIVER'S NAME: _____ DIVISION: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE (DAYS): _____ (EVENINGS): _____

CELL PHONE: _____

HOMETOWN: _____ STATE: _____ CAR #: _____ (*)

CAR YEAR: _____ MAKE: _____ MODEL: _____

PRIMARY SPONSOR: (LIST ONE): _____

HOME TRACK: _____

Registration fee of \$100

RETURN TO: ACT - P.O. BOX 281, WATERBURY, VT 05676

FAX: 802-244-1616 Email: tb@acttour.com