# **OFFICIAL ENTRY FORM**

11th Annual War in West Union Fayette County Speedway West Union, Iowa Thursday, May 23, 2024



**USMTS Rules** apply. All drivers must draw each day prior to the drivers meeting. Qualifying will be done through heat race passing points and "B" Mains. Typically, the top 12 or 16 in passing points are locked into the "A" Main. The top 8 redraw and 12 or more advance from the "B" Main(s). RACEceivers and AMB transponders are mandatory and available for rent.

## Entry fee \$125 by May 21 or \$150 on raceday.

**Licensed:** 1. \$3000, 2. \$1700, 3. \$1200, 4. \$900, 5. \$800, 6. \$700, 7. \$650, 8. \$600, 9. \$575, 10. \$550, 11. \$525, 12. \$500, 13. \$475, 14. \$470, 15. \$465, 16. \$460, 17. \$455, other starters \$450, non-qualifiers \$100.

**Non-Licensed:** 1. \$3000, 2. \$1500, 3. \$1000, 4. \$700, 5. \$600, 6. \$500, 7. \$450, 8. \$400, 9. \$350, 10. \$325, 11. \$300, other starters \$250, non-qualifiers \$100.

Enter online at **usmts.com/register** or call **(515) 832-7944**ONLINE REGISTRATION ADD \$10 SERVICE FEE
CREDIT CARD BY PHONE ADD 4% SERVICE FEE
NO REFUNDS

Support Classes: USRA Stock Cars, USRA Hobby Stocks and USRA Tuners.

#### **TIMES**

Pits Open 5 p.m. Grandstands Open 5 p.m. Drivers Meeting 6:45 p.m. Hot laps 7 p.m. Racing 7:30 p.m.

### **PRICES**

#### **Grandstands:**

6 & Older \$20 5 & Under FREE

### **Pit Passes:**

11 & Older \$40 10 & Under \$10

11th Annual War in West Union, Fayette County Speedway, West Union, Iowa, Thursday, May 23, 2024

By filling out and submitting this form indicating my entry for the event designated, I agree to abide by the rules and regulations of the USMTS and hosting racetrack. Furthermore, I understand there will be no refunds on entry fees. Checkthe box next to the class you're entering, complete the form, and then submit completed form.

# Entry fee \$125 by May 21 or \$150 on raceday.

Driver's Name	Car #	Chassis _			
Address	City			State	Zip
Home Phone (	Other Phone (	)			( Phone Type )
Social Security or Tax ID #		of Birth	/	/	(mm/dd/yy)
Email Address	Website Add	dress			
Sponsor	Transponder #				
	If owner is different than driver, complete t	the following info	rmation:		
Owner's Name	Social Security or Tax ID #				
Address	City		State	Zip	
Make	check payable to USMTS and mail to PO B	OX 905, WEBS	TER CITY	IA 50595	
	For credit card purchases, please comp	•			
NAME ON CARD	CARD N	UMBER			
	CARD TYPE (circle one): Visa / Mastercard			•	