

DAYTONA 200 ELIGIBILITY QUESTIONNAIRE

If your experience is not with ASRA/CCS, please provide a copy of current Expert card(s) with completed questionnaire.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Telephone: _____ Email: _____

Number of years Expert road racing experience : _____ Make, Model and Displacement of

Equipment Used: _____

The certifying organization must certify the DAYTONA 200 QUALIFYING RECORD OF EXPERT RESULTS on the reverse side of this form and sign below:

Certifying Organization Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Telephone: _____ Email: _____

Signature: _____ Title: _____ Date _____

Printed Name : _____ Phone # _____

Should you have any questions, please Eric Kelcher, ASRA Director of Competition, at 817-246-1127. Once this form has been completed, please return it along with a completed Entry form to: ASRA - 9928 Peregrine Trail - Ft Worth TX 76108 or fax it to 817-246-2977

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