



# 2017 SOAR PRE-ENTRY RACE FORM

PLEASE PRINT AND FILL OUT  
ALL AREAS OF THE FORM  
INCOMPLETE FORMS MAY BE REJECTED.

NAME:		DATE:	
ADDRESS:		BIKE NUMBER:	
CITY/PROV:		Please note that this form must be sent to the SOAR office no later than 8PM the Tuesday prior to the event weekend to qualify for the pre-register pricing. No exceptions.	
POSTAL:			
TELEPHONE:			
EMAIL:			
DATE OF EVENT:			

	CLASS SELECTION				TOTAL
1 <sup>ST</sup>					\$135.60
2 <sup>ND</sup>					\$237.30
3 <sup>RD</sup>					\$310.75
4 <sup>TH</sup>					\$355.95
5 <sup>TH</sup>					\$378.55
<input type="checkbox"/>	I am eligible and want to use my free Friday practice	<b>GRAND TOTAL PRE-REGISTER</b>			

**PRE-REGISTRATION PAYMENT:**

Credit Card \_\_\_\_\_  Cash

Please submit this form to [info@soaracing.ca](mailto:info@soaracing.ca) You will receive an invoice from us and instructions on how to pay online through our e-commerce function. Please note that all pre-entries must be received no later than the Tuesday at 8pm before each race round. Entries received after that date/time will not be processed at the pre-registration price.

Release: I hereby release and agree to hold harmless SOAR, the participants, officers, directors, representatives and agents, all of them of and from all liability, loss, claims and demands that may accrue from any loss, damage or injury (including death), to any person or property, in any way resulting from, or arising in connection with these events, and whether arising while engaged in competition, in practice, or in preparation therefore, or while upon entering or departing from said premises, from any cause whatsoever. I know the risk and danger to myself and property while upon said premises or while participating or assisting in these events, so voluntarily and in reliance upon my own judgment and liability, and I thereby assume all risk for loss, damage or injury (including death) to myself and my property from any cause whatsoever. Application implies the rider agrees that SOAR shall have a license to use the rider's name, signature, initials, likeness, photograph, and similar materials in connection with the advertising, promotion and sale of products by SOAR.

X \_\_\_\_\_  
Participant Signature

X \_\_\_\_\_  
Signature of Parent or Legal Guardian (If participant is a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

OFFICE USE ONLY	Transaction #			License Issued:
	Date Entered		Cash Paid:	Free Practice: