

## PN SA MASTER'S CHAMPIONSHIP ENTRY

USSA# \_\_\_\_\_ SEX \_\_\_\_\_ CLUB: \_\_\_\_\_

I will need to purchase a temporary license and sign a waiver at registration. \_\_\_\_\_

I have included my Temporary license form and payment of \$25.00 to USSA \_\_\_\_\_

I have included the medical exception form (for those with no medical insurance) \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

Year of Birth \_\_\_\_\_ AGE \_\_\_\_\_ CLASS \_\_\_\_\_

**(Required)**

### EVENTS ENTERING:

			<u>Early Entry Fee</u>	<b>After 4-2-10</b> <u>Late Entry Fee</u>	
SG Training:	Th. April 8	\$ _____	\$20.00	\$25.00	_____
SG Race 1:	Fri. April 9	\$ _____	\$39.00	\$44.00	_____
SG Race 2:	Fri. April 9	\$ _____	\$39.00	\$44.00	_____
<b>BOTH SG's:</b>	Fri. April 9	\$ _____	<b>\$60.00</b>	<b>\$65.00</b>	_____
GS Race:	Sat. April 10	\$ _____	\$37.00	\$42.00	_____
SL Race:	Sun. April 11	\$ _____	\$37.00	\$42.00	_____
Dinner:# _____	Sat. April 10	\$ _____	\$29.00/pp	\$35.00	_____

Total Entry Fee: \$ \_\_\_\_\_ Total Late Entry Fee: \$ \_\_\_\_\_

Make checks payable to: MBSEF Race Administrator - Cheryl  
563 SW 13<sup>th</sup> St. Suite 201  
Bend, OR 97702

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**Visa/MC #** \_\_\_\_\_ **exp. date** \_\_\_\_\_ **cvc code:** \_\_\_\_\_

**Name as it appears on the card** \_\_\_\_\_

**Signature:** \_\_\_\_\_

Temporary Master's license is \$25.00 for the series and is due at registration if not included with this entry. Checks for the license are payable to USSA.

