



**Russ Read Memorial
December 18 - 19, 2010**

USSA # _____

Please use this form **in place of** the PNSA /USSA Race Entry Card

RACER NAME : (first) _____ (last) _____

Sex _____ Year of Birth _____ Class _____ CLUB _____

Parent(s) Name: _____

Street Address: _____

City _____ State _____ Zip _____

Phone number _____ **Email address** _____

GS - Sat, December 18 - \$36.00 _____ **postmarked after 12/ 8 \$40.00** _____
GS - Sun, December 19 - \$36.00 _____ **postmarked after 12/8 \$40.00** _____

Total paid by check to MBSEF enclosed \$ _____

Paid by Visa/MC # _____ Exp: _____ Security Code _____

Name on card: _____

MBSEF Office Use Only:

Amt Paid _____

Entry Check Number _____

Visa Reference Number _____

Liability Release _____