



WEST COAST MOTO JAM

COMPETITOR CREDENTIALS

Select one of the following:

FLAT TRACK (FT) _____
www.eddiemulderswcvdts.com

MOTOCROSS (MX) _____
www.bradlackey.com

SUPERMOTO (SM) _____
www.supermotousa.com

****Visit promoter website for competition registration****

RIDER NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIP: _____

DAYTIME PHONE: _____

E-MAIL ADDRESS: _____

COMPETITOR HARD CARD: _____ @\$50 = \$ _____

(Includes one event pass, one camping/pit space)

CREW PASS: _____ @\$35 = \$ _____

(Includes one event pass)

TOTAL = \$ _____

PAYMENT METHOD: VISA ___ M/C ___ AMEX ___ DISC ___ CHECK ___

NAME ON CARD: _____

CARD NUMBER: _____ **EXP DATE:** _____

PLEASE MAKE CHECKS PAYABLE TO INFINEON RACEWAY.

**FILL OUT FORM COMPLETELY AND RETURN TO INFINEON RACEWAY
MAIL: HIGHWAYS 37&121 SONOMA, CA 95476, ATTN: WCMJ COMPETITORS
FAX: 707-938-8430 | EMAIL DSCHWARTZ@INFINEONRACEWAY.COM**