

VEHICLE #: _____

2024 Medina County Fair Autocross Entry Form
Sunday, August 4, 2024
Entry fee \$10.00

PLEASE FILL OUT COMPLETELY AND LEGIBLY.

NAME: _____

ADDRESS: _____ CITY: _____

ZIP: _____ PHONE: _____

EMAIL ADDRESS: _____

YEAR: _____ MAKE: _____ MODEL: _____

Vehicle Color: _____

SPONSOR:

CLASSES (please circle which class you are running in):

FRONT WHEEL DRIVE CAR

MINI TRUCK/SUV 4 WHEEL DRIVE

MINI TRUCK/SUV 2 WHEEL DRIVE

FULL SIZE TRUCK/CAR REAR WHEEL DRIVE

I have read the rules and accept the decision of the judges as final and elect to use the grounds or track in its present condition. Also, I understand that my helper and I are at our own risk and hereby absolve the Medina County Agricultural Society of any liabilities.

SIGNATURE: _____ DATE: _____