



2010 REGIONAL TEST DAY ENTRY FORM

Please enclose payment with registration form and mail or fax to:

PANOZ MOTOR SPORTS

3233 Concession Rd. #10, Bowmanville, Ontario Canada L1C 3K6

Phone: 905-983-9141 Fax: 905-983-5195

E-mail: info@mosport.com Web Site: www.mosport.com

Team Name/Owner: _____ Phone: _____

Address: _____ City: _____ Postal Code: _____

Email Address: _____

Car Make: _____ Model: _____ No: _____ Colour: _____

Driver's Name(s) _____ Race License _____

In Case Of Emergency Contact: _____ Phone: _____

Address: _____ City: _____ Postal Code: _____

Special Price : Pay for all six days prior to April 1st and pay only \$1,200.00

**All prepayments MUST be received or post-marked prior to dates noted

PLEASE NOTE: WE DO NOT ISSUE REFUNDS

TEST DAY	\$250 on or before:	\$300 on or before:	\$350 after:
May 7	April 23 <input type="checkbox"/>	April 30 <input type="checkbox"/>	April 30 <input type="checkbox"/>
July 2	June 18 <input type="checkbox"/>	June 25 <input type="checkbox"/>	June 25 <input type="checkbox"/>
August 6	July 23 <input type="checkbox"/>	July 30 <input type="checkbox"/>	July 30 <input type="checkbox"/>
September 3	August 20 <input type="checkbox"/>	August 27 <input type="checkbox"/>	August 27 <input type="checkbox"/>
September 17	September 3 <input type="checkbox"/>	September 10 <input type="checkbox"/>	September 10 <input type="checkbox"/>
October 1	September 17 <input type="checkbox"/>	September 24 <input type="checkbox"/>	September 24 <input type="checkbox"/>
All prices include GST/HST # 895629020			TOTAL

Please check one of the following: (please make cheque payable to "Panoz Motor Sports")

Cash: Cheque: M/C: Visa: DD:

Account Number: _____ Exp. Date: _____

Signature: _____ CVC # (last 3 digits) _____

All Drivers must sign the waiver form at gate and wear proper helmets and appropriate apparel.

All vehicles must be safe and track worthy and are the sole responsibility of the owner/driver.

*Mosport will hold Test Days prior to major events May , June , July and August
Call for details!*

Date Received	Processed By	Authorization No

