



Rocky Mountain Vintage Racing, Inc.

www.rmvr.com (Club Website)

PPIHC Committee Chairman: Tony Martins

6387 S. Hill St.

Littleton, CO 80120

720-232-0998(Phone)

cycleworksusa@msn.com (Email)

2008 PIKES PEAK INTERNATIONAL HILL CLIMB

July 15-20, 2008

REQUEST FOR ENTRY

ENTRY FEE \$750

Space is limited and all entries must be received by March 1, 2008.

Send entries to: Tony Martins, 6387 S. Hill St. Littleton, CO 80120

DRIVER INFORMATION:

Name:(last, first, m.i.) _____

Address: _____

City: _____

State: _____ ZIP: _____

Phones: Home: () _____

Work: () _____

Cell: () _____

Date of Birth: _____

Emergency Contacts: At Track: _____

Other : _____ Phone: _____

RACE CAR INFORMATION:

Year: _____ Car # _____

Make: _____

Model: _____

Color: _____

Displacement: _____cc (NOT c.i, Thanks!)

Fuel: Gas? _____ or Alcohol ? _____

Do you run an AMB Transponder? Yes ___ No ___

Transponder # _____

Is your Transponder now registered with RMVR? Yes ___ No ___

COMPETITION LICENSE INFORMATION:

Issuing Club Name: _____

Club Phone #: _____

License Number : _____

License Expiration Date: _____

Are you currently under probation or suspension from any sanctioning body? Yes ___ No ___

Has your competition license been denied or revoked in the last 3 years? Yes ___ No ___

If yes please provide details on reverse.

Medical Insurance – All drivers MUST have medical insurance to participate in this event. Proof of insurance must be shown at Registration.

Medical Insurance Carrier:

Policy Number: _____

For Office Use Only: Date Received: _____ Check #: _____ Total Amount: \$750 Entry #: _____

RACING HISTORY – Please detail your previous racing experience from most recent to oldest. Make sure you list any Pikes Peak history.

CAR HISTORY

Each entrant needs to submit a digital current color facial photograph of the driver and one of the race vehicle. Email photos to admin@rmvr.com. Photos will be used for promotional purposes.

Pikes Peak International Hill Climb would retain the rights to limit the race day field to a max of the fastest 25 entries if they have an unexpected increase in the normal classes that would prevent getting the event concluded on time. If that occurs there will be no refunds of entry fees.

As a condition of this Request For Entry, I certify the following:

- I have read the rules of ROCKY MOUNTAIN VINTAGE RACING, LTD. and agree to abide by those rules.
- The car entered has been approved by RMVR Eligibility and continues to conform with the rules. (Guest Exhibition cars can be approved on a case-by-case basis by the Chief Steward.)
- RMVR reserves the right to refuse any entry or to remove from competition any competitor as deemed necessary.
- At any time during the race event, any participant may be required to meet with the Steward and other officials to consider driving or behavior infractions. Failure to attend such a meeting can result in immediate disqualification from the event.
- As an entrant and/or driver, I make this Request For Entry into this RMVR event with the knowledge that motor racing is dangerous and that I will be expected to sign a "release form". As Driver/entrant I further acknowledge that vintage racing may involve dangers present in any form of contemporary racing; that vintage racing may also involve special dangers including, but not limited to, lack of contemporary safety equipment in my own or in competitors' cars (such as roll cages, fuel cells, fire systems, etc.); and that race groupings may include different types of cars creating potential problems of visibility and disparate speeds.

SIGNATURE REQUIRED - Driver/Entrant _____ Date _____

Supplemental Information

NAVIGATOR INFORMATION:

Name:(last, first, m.i.) _____

Address: _____

City: _____

State: _____ ZIP: _____

Phones: Home: () _____

Work: () _____

Cell: () _____

Date of Birth: _____

Emergency Contacts: At Track: _____

Other : _____ Phone: _____

RACE CAR INFORMATION:

Year: _____ Car # _____

Driver: _____

Make: _____

Model: _____

Color: _____

COMPETITION LICENSE INFORMATION:

Issuing Club Name: _____

Club Phone #: _____

License Number : _____

License Expiration Date: _____

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