



2009-2010



2010 Class Advancement Approval Form

2100 North Rt. 12, PO Box 103, Wauconda, IL 60084

Phone (847) 487-6900

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Fax (847) 487-9122

Before you can move up a class, you must be approved by WTC. You MUST sign up for the event BEFORE you send in this form. WTC will evaluate your performance at the event you have indicated below. Please complete this form and mail or fax to WTC Headquarters by the **TUESDAY BEFORE** the event. You cannot request a class advancement evaluation at an event, this form **MUST be on file at WTC Headquarters prior to event.**

Bib#: _____ DOB: _____

First Name: _____ Last Name: _____

Day Phone: _____ Eve Phone: _____

Sled Brand: _____ Sled Model: _____

WTC Officials will be identifying you based on the above information. If your bib number and/or sled brand and model do not match the above information, WTC will not be able to approve you. You will be notified if you qualify to move up to the class you designate below. You will be notified the week following the race in which you were evaluated, not at the track. PLEASE DO NOT call the WTC office, we will contact you. Thank you.

I would like to be evaluated to move up from:

- Sport to Semi Pro
- Junior 16 - 17 to Sport
- Junior 14 - 15 to Sport
- Junior 14 - 15 to Junior 16 - 17

Attention Junior Novice 10 – 14 Drivers: Due to insurance requirements, you must be 14 years of age to advance to the Junior 14 – 15 Class

Snow Cross Racing Accomplishments:

Date: _____ Venue: _____ Class: _____ Place in Final: _____

Point Accomplishments: _____

Date: _____ Venue: _____ Class: _____ Place in Final: _____

Point Accomplishments: _____

Date: _____ Venue: _____ Class: _____ Place in Final: _____

Point Accomplishments: _____

**Attach/fax any letters of recommendation to this form*

WTC Headquarters must receive this form by the TUESDAY before the designated event.

OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Official Name: _____

Pro Name: _____

Approved: YES NO

Approved: YES NO

If no, explain: _____

If no, explain: _____

Driver – Print Name _____

Driver – Signature _____ Date _____

Parent/Legal Guardian* - Print Name _____

Parent/Legal Guardian* - Signature _____ Date _____

*Required if applicant is under the age of 18