

**Willamette Alpine Race Program
PETER LORINCZ CUP
Willamette Pass, Oregon
February 16 - 17, 2013
RECREATIONAL ENTRY
NOT USSA**

Name: _____ Birth date: _____

Address: _____ Gender: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Club: _____

Class: **U8** **U10** **U12** **U14** **U16** **U18** **U21** **ADULT**
 (6 & 7 yrs) (8 & 9 years) (10 & 11 yrs) (12 & 13 yrs) (14-15yrs) (16-17yrs) (18-20yrs) (21 & up)
 (AGE AS OF DECEMBER 31, 2012)

Entry Fees:

SL-Saturday, February 16th: \$20.00 \$ _____

GS-Sunday, February 17th: \$20.00 \$ _____

Total Amount Due: \$ _____

Please make checks payable to WARP
Deadline: Received by February 13th, 2013

**ENTRY WILL NOT BE ACCEPTED WITHOUT COMPLETED ENTRY FORM,
WILLAMETTE PASS LIABILITY RELEASE AND ENTRY FEES.**

Send to:

**Willamette Alpine Race Program
Peter Lorincz Cup Registrar
1574 Coburg Road #180
Eugene, OR 97401**

Phone: 541-357-9277

Email: warpracing@gmail.com