

# 2017 Santa Fe 500 Entrant Form

Name \_\_\_\_\_

Shirt \_\_\_\_\_ M \_\_\_\_\_ W \_\_\_\_\_ size

Co-Driver \_\_\_\_\_

Shirt \_\_\_\_\_ M \_\_\_\_\_ W \_\_\_\_\_ size

Address \_\_\_\_\_

City, State, zip \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Entry Car \_\_\_\_\_

year / type / color \_\_\_\_\_

Include a check for \$225.00 per person payable to: **Bob Hall**  
mail to:

Bob Hall  
1964 Thomas Avenue  
Santa Fe, NM 87505.