



VKA KART SHOW Registration Form

Entry No. _____
Event Location: _____

HISTORIC	REAR	SIDEWINDER	PAST CHAMPION
<input type="checkbox"/> Unrestored <input type="checkbox"/> Restored <input type="checkbox"/> Modified	<input type="checkbox"/> Unrestored <input type="checkbox"/> Restored <input type="checkbox"/> Modified	<input type="checkbox"/> Unrestored <input type="checkbox"/> Restored <input type="checkbox"/> Modified	<input type="checkbox"/> Past Champion <input type="checkbox"/> Enduro <input type="checkbox"/> Mini Bike
Kart Information		Owner Information	
Frame Make _____ Model _____ year _____ frame _____ . Engine(s) Make _____ Model _____		Name _____ Address _____ City _____ State _____	



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