



ONLINE TICKET PURCHASE FORM

NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

ALL ITEMS ARE REQUIRED TO BE FILLED OUT WITH VALID INFORMATION.

PLEASE INSERT THE QUANTITY NEXT TO EACH ITEM YOU WOULD LIKE TO PURCHASE:

_____ SATURDAY ONLY TICKET \$20

_____ SUNDAY ONLY TICKET \$30

_____ WEEKEND TICKET \$35

_____ WEEKEND PIT PASS \$10

_____ INSIDE THE GATE PARKING SATURDAY \$10

_____ INSIDE THE GATE PARKING SUNDAY \$10

TOTAL PRICE OF PURCHASE: \$ _____

MAKE CHECKS PAYABLE TO: CHRIS EVANS INC.

CREDIT CARD TYPE: _____ CREDIT CARD EXPIRATION DATE: _____

(VISA OR MASTERCARD ONLY)

CREDIT CARD NUMBER: _____ SECURITY CODE: _____

BILLING ZIP CODE: _____

PLEASE MAIL, E-MAIL OR FAX THIS APPLICATION TO:

CHRIS EVANS INC.
ATTN: NASCAR EVENT
PO Box 10144
PORTLAND, OR 97296

PHONE: 503.517.0048
FAX: 503.517.0325
EMAIL: AUSTIN.HOLMES@CHRISEVANSINC.COM

GENERAL RULES, INFORMATION AND DISCLAIMERS

NO ALCOHOLIC BEVERAGES MAY BE BROUGHT IN TO THE TRACK, ABSOLUTELY NO FIREWORKS OF ANY KIND, DOGS ARE PERMITTED; LEASH LAWS ARE IN EFFECT. NO ATV'S.