

RACER: \_\_\_\_\_

For office use only:  
Team # \_\_\_\_\_

**2012 CAIN'S QUEST CHALLENGE ENTRY FORM**

To register for Cain's Quest, please complete the following information and return by fax or e-mail. Deadline for registration is January 31, 2012. Please note that registration is only guaranteed upon receipt of payment. **You will not be registered until ALL required documentation and photos are received. Space is limited.**

ENTRY FEES (per driver): \$2500 plus tax (\$2825.00 taxes included)

*The cost of registration includes fees for mandatory racers insurance.*

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Prov \_\_\_\_ Postal Code \_\_\_\_\_  
Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Fax \_\_\_\_\_  
Email: \_\_\_\_\_ Cell \_\_\_\_\_

**1<sup>st</sup> Emergency Contact**

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Prov \_\_\_\_ Postal Code \_\_\_\_\_  
Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
Email: \_\_\_\_\_

**2nd Emergency Contact**

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Prov \_\_\_\_ PC \_\_\_\_\_  
Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_  
Email: \_\_\_\_\_

RACER: \_\_\_\_\_

Make _____	Model _____	CC's _____
Racing Partner _____		

Please choose your method of payment.

Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Money Order \_\_\_\_\_ Cash \_\_\_\_\_  
 Card Number \_\_\_\_\_ Expiry Date \_\_\_\_\_  
 Card Holder Name \_\_\_\_\_ Signature \_\_\_\_\_

*If paying by money order, please make payable to Cain's Quest.  
 If paying by credit card, applicable service charges may apply.  
 All Cain's Quest fees are non-refundable.*

Yes, I would like to have pre-paid fuel available at Cain's Quest fueling stations along the race route.  
*Any drivers wishing to purchase pre-paid gas at Cain's Quest fueling stations must complete and submit the Cain's Quest gas form and provide a credit card number upon registration.*

How did you first hear about Cain's Quest?

Newspaper \_\_\_\_\_ Magazine \_\_\_\_\_ Radio \_\_\_\_\_ Television \_\_\_\_\_  
 Website \_\_\_\_\_ Friend \_\_\_\_\_ Other \_\_\_\_\_

**For statistical purposes please complete the following information**

***If visiting from outside of the Labrador Region please indicate:***

Number of people that will be travelling with you to Labrador. \_\_\_\_\_ (Example: support teams, family etc.)

Where you (and those accompanying you) will be staying during your visit \_\_\_\_\_

Estimated time of arrival: \_\_\_\_\_

Estimated time of departure: \_\_\_\_\_

Are you a member of a snowmobile club in your area? Y or N

If yes, please provide the name of the club: \_\_\_\_\_

**I declare that I am of sound mind and good health and am 18 years or older prior to race day. From the date I sign this entry form, until post-race, I agree to abide by all rules and code of conduct set forth by the Cain's Quest Committee. I understand there is a fee of \$100 per change in the event my partner is unable to race on race day, except for medical reasons. As a registered racer, I agree to have my name and contact information released to media to be contacted for personal interviews or statements to promote Cain's Quest.**

\_\_\_\_\_

DRIVER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_