



Challenge Cup XXXVII

Presented by "Gillett Veterinary Clinic" and "Connecting People, Inc."

LAP SPONSORSHIP SIGN-UP SHEET

Lap Number (1st Choice) _____ (2nd Choice) _____

If multiple laps desired, please list all _____

Name to be listed: _____

Note: Include name, phone # and website for instant linking from the CNS website.

Total amount due: (\$50 per lap) \$ _____

Payment Method:

Check___, MasterCard___, Visa___, Cash___

Credit Card # _____

Name on Card: _____

Telephone # _____

Expiration Date: ___/___/___

Security Code (on back) _____

Billing Zip Code: _____

FAX completed form to 303-828-2403

Or email it to scott@coloradospeedway.com

