



WELCOME TO THE SEPTEMBER 25-26, 2010 MOJAVE MILE!



The Mojave Mile is ready for action again, this time for two full days of mile shootout racing! Register now for what is sure to become the premiere mile racing event on the West Coast! This time, and from now on, we are able to set up a course that offers favorable wind conditions for the best speeds possible by starting from either end of the runway.

Attached are the basic Registration forms to lock in your spot on the Grid. If you are entering multiple vehicles, you must complete separate forms (except medical) for each vehicle. The Rule Book (which has been updated since the previous event) can be downloaded from [www.mojavemile.com](http://www.mojavemile.com), and a printed copy will be sent to each paid entrant.

1) **Entry Application** (car or motorcycle): (separate form required for each vehicle entered)

Please complete the appropriate form to give us information on the vehicle you wish to bring. If you haven't done so previously, **please include a recent photo of the vehicle for our records**. We also need a **copy of your Driver's License** (color copy preferred) if it wasn't sent to us previously, or if it has changed. If two people are sharing the vehicle, fill in the appropriate data and send a copy of their license also.

All participants without prior racing experience will be granted our Basic License, which permits speeds up to 150 mph. Based on the driver/rider's past experience, we will give Licenses for higher speeds. It is possible to upgrade your License at the event with qualifying run(s) (See the Rule Book.). In our event, the maximum speed allowed for the driver/rider (the License speed), and the maximum speed allowed for the vehicle (the Tech Speed), are **two separate things**, and **the slower of the two** will always be your maximum speed allowed on the course.

2) **Event Fees Form**: (separate form required for each vehicle entered)

On this form, please include all fees as described, and please use this form to pre-order any meal tickets, t-shirts, hats, extra decals, and Speed Certificates desired.

If you are entering the optional Index Challenge (see Rule Book for details), or adding a second driver/rider, please include the payment here as well. Include payment or Credit Card information with your application, or use PayPal from the link on our website.

3) **Tire Form**: (separate form required for each vehicle entered)

Please complete this form and send it back with your application, as we are screening all tire selections prior to your arrival at the event. This is to prevent confusion and to make sure a racer does not show up at the event and be unable to run due to having tires with inadequate speed or load ratings, or tires that are too old to be safe. If you are planning on buying tires between now and the event, please list the tires you will be bringing. All tires will be physically inspected at Tech Inspection. See the Rule Book for Tire requirements.

4) **Medical Release and Emergency Contact forms**: (one of each required for each driver or rider)

Each person driving or riding a vehicle in the event must complete these forms and return them to MKM. While we sincerely hope that these forms will never be needed, we have to have them available, just in case. This is important information for the emergency response team to have. The Medical form needs to be filled out only once per entrant per year, unless something changes. The Emergency Contact form must be filled out fresh for each entrant for each event.

Once you have completed and returned these forms and paid your fees, you will be locked into the Grid. When we receive the forms, we will mail you a packet of informational items and additional forms, such as the event Schedule, Paddock and Grid instructions, Rule Book, local Hotel and Restaurant accommodations, Tech Inspection form, and other things you will need to make your race weekend safe and fun. Once you arrive, you will simply have to check in with our Registration desk, sign the necessary waivers, pick up your access wristbands, merchandise, and head off to Tech Inspection!

We look forward to seeing you at this and many future Mojave Mile speed weekends!



**Mojave Mile Shootout**  
**Mojave, CA Sept. 25-26, 2010**  
**Entry Application – Cars**



Fill in car and driver information below. Each car may be shared by a second driver if desired. Fill in that data if applicable. Second driver will pay a second full entry fee less \$40. The car will remain in the same division for both drivers, so both must meet all the standards for that division. All entrants must be 18 yrs. or older and have a current, valid driver's license.

<p><b>Primary Driver : (required)</b></p> <p><b>Name:</b> _____</p> <p><b>Address:</b> _____</p> <p>_____</p> <p><b>City/State/Zip:</b> _____</p> <p><b>D/L #:</b> _____</p> <p><b>D/L State/Prov.:</b> _____ <b>DOB:</b> _____</p> <p><b>Phone #s:</b> _____</p> <p><b>Email:</b> _____</p> <p><small>All entrants qualify for an MKM Basic license allowing up to 150 MPH. If you wish to apply for a higher license, <b>list below your racing experience and speeds achieved.</b> If you already hold a higher MKM license or an SCTA license, <b>please note it here.</b></small></p> <p>_____</p> <p>_____</p>	<p><b>Second Driver: (if applicable)</b></p> <p><b>Name:</b> _____</p> <p><b>Address:</b> _____</p> <p>_____</p> <p><b>City/State/Zip:</b> _____</p> <p><b>D/L #:</b> _____</p> <p><b>D/L State/Prov.:</b> _____ <b>DOB:</b> _____</p> <p><b>Phone #s:</b> _____</p> <p><b>Email:</b> _____</p> <p><small>All entrants qualify for an MKM Basic license allowing up to 150 MPH. If you wish to apply for a higher license, <b>list below your racing experience and speeds achieved.</b> If you already hold a higher MKM license or an SCTA license, <b>please note it here.</b></small></p> <p>_____</p> <p>_____</p>
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<p><b>Vehicle Year:</b> _____ <b>Make:</b> _____ <b>Model:</b> _____ <b>Color:</b> _____</p> <p><b>Body Style:</b> _____ <b>If street, License #:</b> _____ <b>State/Prov.:</b> _____</p> <p><b>Fuel:</b> Gas ___ Diesel ___ Other (specify) _____ <b>Nitrous Oxide?</b> Y N (circle one)</p> <p>Circle the Division you wish to enter: <b>Grand Touring (GT)</b>    <b>Super Sport (SS)</b>    <b>Unlimited (U)</b></p> <p><b>S4 Division (S4)</b>    <b>Land Speed (LSA)</b> (if LSA, enter SCTA class here: _____)</p> <p><small>In general, the division you should select is determined by your car's modification level, its level of safety equipment, and its tires, and by how fast you plan to go. S4 Division cars must be showroom stock, street licensed and insured. LSA cars must have a current SCTA logbook and matching chassis sticker, and must have recently passed a Land Speed tech inspection. (No streamliners or push starts, please.) Please refer to the Rule Book for help in determining an appropriate division choice for you.</small></p> <p><b>Can this vehicle's engine be started/restarted by the driver, while buckled in, without outside help ?</b>    Y    N (circle one)</p> <p><b>SAFETY EQUIPMENT present in the vehicle: (check all that are installed)</b>    <input type="checkbox"/> Fire Extinguisher</p> <p><input type="checkbox"/> OEM Belts    <input type="checkbox"/> Racing Harness    <input type="checkbox"/> Roll Bar    <input type="checkbox"/> Roll Cage    <input type="checkbox"/> Fuel Cell    <input type="checkbox"/> Fire System    <input type="checkbox"/> Parachute</p>
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**I/we certify that the information above is correct and understand that any misrepresentation is grounds for disqualification from the event and forfeiture of entry fees. I/we have read, and I/we understand, accept, and agree to abide by the rules and regulations for this event.**

**(signed) Driver #1:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**(signed) Driver #2:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**For More Information Call, Fax, Write or Email**

MKM Racing Promotions, 9850 S. Maryland Pkwy, Ste. A5-143, Las Vegas, NV 89183  
 Voice: 702-614-6108 Fax: 702-614-6109 Email: [mike@mojavemile.com](mailto:mike@mojavemile.com)  
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**Mojave Mile Shootout**  
**Mojave, CA Sept. 25-26, 2010**  
**Entry Application - Motorcycles**



Fill in bike and rider information below. Each bike may be shared by a second rider if desired. Fill in that data if applicable. Second rider will pay a second full entry fee less \$40. The bike will remain in the same division for both riders, so both must meet all the standards for that division. All entrants must be 18 yrs. or older and have a current, valid driver's license with motorcycle endorsement.

<p><b>Primary Rider : (required)</b></p> <p><b>Name:</b> _____</p> <p><b>Address:</b> _____</p> <p>_____</p> <p><b>City/State/Zip:</b> _____</p> <p><b>D/L #:</b> _____</p> <p><b>D/L State/Prov.:</b> _____ <b>DOB:</b> _____</p> <p><b>Phone #s:</b> _____</p> <p><b>Email:</b> _____</p> <p><small>All entrants qualify for an MKM Basic license allowing up to 150 MPH. If you wish to apply for a higher license, <b>list below your racing experience and speeds achieved.</b> If you already hold a higher MKM license or an SCTA license, <b>please note it here.</b></small></p> <p>_____</p> <p>_____</p>	<p><b>Second Rider (if applicable)</b></p> <p><b>Name:</b> _____</p> <p><b>Address:</b> _____</p> <p>_____</p> <p><b>City/State/Zip:</b> _____</p> <p><b>D/L #:</b> _____</p> <p><b>D/L State/Prov.:</b> _____ <b>DOB:</b> _____</p> <p><b>Phone #s:</b> _____</p> <p><b>Email:</b> _____</p> <p><small>All entrants qualify for an MKM Basic license allowing up to 150 MPH. If you wish to apply for a higher license, <b>list below your racing experience and speeds achieved.</b> If you already hold a higher MKM license or an SCTA license, <b>please note it here.</b></small></p> <p>_____</p> <p>_____</p>
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**Bike Year:** \_\_\_\_\_ **Make:** \_\_\_\_\_ **Model:** \_\_\_\_\_ **Color:** \_\_\_\_\_

**Engine size cc:** \_\_\_\_\_ **If street, license #:** \_\_\_\_\_ **State/Prov.:** \_\_\_\_\_

**Fuel:** Gasoline \_\_\_ Other (specify) \_\_\_\_\_ **Super- or Turbocharged?** Y N **Nitrous?** Y N

Circle Division you wish to enter: **Motorcycle Street (MS)** **Motorcycle Modified (MM)**  
**Land Speed Motorcycle (LSM)** (if LSM, enter SCTA class here: \_\_\_\_\_)

*In general, the division you should select is determined by your bike's modification level, its tires, and by how fast you plan to go. Street (MS) division bikes must be currently licensed and insured. LSM bikes must have a current SCTA logbook and matching chassis sticker, and must have recently passed a Land Speed tech inspection. (No full streamliners, please.) Please refer to the Rule Book for help in determining an appropriate division choice for you.*

**Can this vehicle's engine be started/restarted by the rider without outside assistance?** Y N (circle one)

**MINIMUM SAFETY EQUIPMENT CHECK LIST (all are mandatory):**  
 >Full Leathers >Tether Kill Switch >Safety wiring >Full Face Helmet<sup>1</sup> >Leather Gloves and Boots  
 (<sup>1</sup>DOT-only helmets not permitted.) (Not a complete list of requirements. See Rule Book for more details.)

I/we certify that the information above is correct and understand that any misrepresentation is grounds for disqualification from the event and forfeiture of entry fees. I/we have read, and I/we understand, accept, and agree to abide by the rules and regulations for this event.

(signed) Rider #1: \_\_\_\_\_ Date: \_\_\_\_\_

(signed) Rider #2: \_\_\_\_\_ Date: \_\_\_\_\_

**For More Information Call, Fax, Write or Email**  
 MKM Racing Promotions, 9850 S. Maryland Pkwy, Ste. A5-143, Las Vegas, NV 89183  
 Voice: 702-614-6108 Fax: 702-614-6109 Email: [mike@mojavemile.com](mailto:mike@mojavemile.com)  
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# MOJAVE MILE EVENT FEES

Sept. 25-26, 2010

Use a separate form for each vehicle entered



Primary Driver: \_\_\_\_\_ Secondary Driver: \_\_\_\_\_

Vehicle description: \_\_\_\_\_

ENTRY FEES	FEE		AMOUNT
Basic Entry Fee for primary driver/rider -- (2 Days)	\$279		\$
“ “ “ “ (Sunday Only)	\$189		\$
Primary driver/rider LATE CHARGE (if less than 7 days prior)	\$25		\$
Index Challenge Competition Fee for primary driver/rider (Optional)	\$25		\$
(circle choice of index speed: 100 110 120 130 140 150 160 170 180 )			
Additional fee for second driver/rider sharing same vehicle (2 Days)	\$239		\$
“ “ “ “ (Sunday Only)	\$149		\$
Secondary driver/rider LATE CHARGE (if less than 7 days prior)	\$25		\$
Index Challenge Competition Fee for second driver/rider (Optional)	\$25		\$
(circle choice of index speed: 100 110 120 130 140 150 160 170 180 )			
MERCHANDISE (prices include sales tax)		Quantity	AMOUNT
Meal Tickets – adult (each ticket good for one person, one meal)	\$9		\$
Meal Tickets - children under 12	\$5		\$
Top Speed Certificate (optional) (will be mailed after event)	\$35		\$
T-Shirts ( S M L XL ) (pre-order)	\$20		\$
T-Shirts ( XXL XXXL XXXXL ) (must pre-order to guarantee size)	\$22		\$
Hats	\$20		\$
Extra Event Decals (2 are included free with each entry)	\$5		\$
<b>TOTAL TO BE PAID :</b>	<b>&gt;&gt;&gt;&gt;&gt;</b>	<b>&gt;&gt;&gt;&gt;&gt;&gt;&gt;&gt;</b>	<b>\$</b>

METHOD OF PAYMENT: Check Money Order Cash (do not mail cash)  
Visa Mastercard American Express Discover PayPal (I will pay my fees online)

CREDIT CARD # \_\_\_\_\_

Exp. Date: \_\_\_\_\_ (MM/YY)

CVV code # \_\_\_\_\_ (last 3 digits on back, except Amex which is 4 digits printed on front)

Name as it appears on card \_\_\_\_\_

Signature \_\_\_\_\_

Fees must be paid in full no later than 7 days prior to the first day of the event or the \$25 late charge will be added.



## MOJAVE MILE SEPT. 2010 MILE SHOOTOUT TIRE INSPECTION FORM

This form must be completed and returned with your entry.

Use a separate form for each vehicle entered.

NAME \_\_\_\_\_ DIVISION (if known) \_\_\_\_\_

YEAR, MAKE, MODEL, COLOR of CAR or BIKE \_\_\_\_\_

ARE ALL TIRES DOT-APPROVED? (circle one) YES NO (if no, see paragraph below)

MAKE OF TIRE (Michelin, Pirelli, etc.) F \_\_\_\_\_ R \_\_\_\_\_

MODEL OF TIRE (Pilot, Scorpion, etc.) F \_\_\_\_\_ R \_\_\_\_\_

(note: on cars, right and left tires on a given axle must match; either the same make/model/size, or a factory matched pair)

TIRE SIZE/SERVICE DESCRIPTION: (example: P275/40ZR17 99W)

FRONT \_\_\_\_\_ REAR \_\_\_\_\_

LOAD RATING (pounds) FRONT \_\_\_\_\_ REAR \_\_\_\_\_

MAXIMUM INFLATION PRESSURE (psi) FRONT \_\_\_\_\_ REAR \_\_\_\_\_

TREAD DEPTH (full,  $\frac{3}{4}$ ,  $\frac{1}{2}$ , or  $\frac{1}{4}$ ) FRONT \_\_\_\_\_ REAR \_\_\_\_\_

CURRENT MILEAGE FRONT \_\_\_\_\_ REAR \_\_\_\_\_

DATE OF PURCHASE if known FRONT \_\_\_\_\_ REAR \_\_\_\_\_

DATE CODES (4-digit) (R/L for cars) FRONT \_\_\_\_\_ / \_\_\_\_\_ REAR \_\_\_\_\_ / \_\_\_\_\_

We strongly recommend not using tires greater than 4 years old, and tires more than 6 years old will not be allowed. (The oldest allowed date code will be **3804**.) Tires must be in excellent condition with no repairs or uneven wear. Inspect your tires closely for cuts, punctures, or sidewall cracks before bringing them to the event. Repaired tires are not allowed.

**Load Ratings:** All tires must have an equal or greater load rating than the vehicle's original OEM-spec tire. (Example: if the original tire for a car is a P205/65R15 rated @ 1400 lbs, then any replacement tire used on that car must also have a load rating of at least 1400 lbs.) If the OEM rating is in any doubt, it is the responsibility of the entrant to document them. Vehicles (such as those originally constructed only for racing) that do not have OEM tire ratings must submit tire and vehicle info as below.

**Non-DOT Tires:** Those who wish to use any non-DOT tires **must submit** a description of the vehicle, the vehicle's top speed and weight, and the intended tire types and sizes to MKM for **pre-approval**. Use the back of this form if needed. Tires meant for Drag Racing, except for DOT Drag Radials, are usually not acceptable.

**MKM RACING - MEDICAL INFORMATION FORM  
MOJAVE MILE SHOOTOUT**

**(each Driver or Rider must complete a separate form, and also an Emergency Information form)**



Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

**HEALTH HISTORY**

- |                          |                          |                       |                          |                          |                        |                          |                          |  |
|--------------------------|--------------------------|-----------------------|--------------------------|--------------------------|------------------------|--------------------------|--------------------------|--|
| <b>Yes</b>               | <b>No</b>                |                       | <b>Yes</b>               | <b>No</b>                |                        | <b>Yes</b>               | <b>No</b>                |  |
| <input type="checkbox"/> | <input type="checkbox"/> | Asthma                | <input type="checkbox"/> | <input type="checkbox"/> | Nervous Stomach        | <input type="checkbox"/> | <input type="checkbox"/> | Head or Spinal Injuries                      |
| <input type="checkbox"/> | <input type="checkbox"/> | Tuberculosis          | <input type="checkbox"/> | <input type="checkbox"/> | Muscular Disease       | <input type="checkbox"/> | <input type="checkbox"/> | Extensive confinement by Illness or Injury   |
| <input type="checkbox"/> | <input type="checkbox"/> | Kidney                | <input type="checkbox"/> | <input type="checkbox"/> | Rheumatic Fever        | <input type="checkbox"/> | <input type="checkbox"/> | Seizures, fits, convulsions, or fainting     |
| <input type="checkbox"/> | <input type="checkbox"/> | Blood-Borne Pathogens | <input type="checkbox"/> | <input type="checkbox"/> | Psychiatric Disorder   | <input type="checkbox"/> | <input type="checkbox"/> | Any other nervous disorder                   |
| <input type="checkbox"/> | <input type="checkbox"/> | Diabetes              | <input type="checkbox"/> | <input type="checkbox"/> | Cardiovascular Disease | <input type="checkbox"/> | <input type="checkbox"/> | Any other diseases                           |
|                          |                          |                       | <input type="checkbox"/> | <input type="checkbox"/> | Gastrointestinal Ulcer | <input type="checkbox"/> | <input type="checkbox"/> | Permanent defect from Illness/disease/injury |

If answer to any of the above is yes, explain: \_\_\_\_\_  
\_\_\_\_\_

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Blood Type: \_\_\_\_\_

Drug Sensitivities: \_\_\_\_\_

Current Medications: \_\_\_\_\_

Medical Alerts: \_\_\_\_\_

Name of Personal Physician or Health Care Provider (MANDATORY): \_\_\_\_\_

Phone Number of Personal Physician or Health Care Provider (MANDATORY): \_\_\_\_\_

Insurance Carrier and Policy Number: \_\_\_\_\_

**Vision:** Right 20/\_\_\_\_ Left 20/\_\_\_\_ Both 20/\_\_\_\_ With/Without Corrective Lenses (circle one)

- |                 |                          |                          |
|-----------------|--------------------------|--------------------------|
|                 | Normal                   | Abnormal                 |
| Hearing         | <input type="checkbox"/> | <input type="checkbox"/> |
| Extremities     | <input type="checkbox"/> | <input type="checkbox"/> |
| Heart Condition | <input type="checkbox"/> | <input type="checkbox"/> |
| Lungs & Chest   | <input type="checkbox"/> | <input type="checkbox"/> |
| General System  | <input type="checkbox"/> | <input type="checkbox"/> |

If ABNORMAL, explain: \_\_\_\_\_

**I DO/DO NOT (circle one) give MKM Racing Promotions permission to release my medical information to emergency medical personnel.**

By signing this form below, you certify that the above is true and complete, and further certify there are no physical or mental limitations to your participation in any MKM Racing Promotions, LLC event.

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_



# MKM RACING MOJAVE MILE EMERGENCY INFORMATION FORM



Please completely fill out this form and send it back with your entry form. A new form must be sent in for each event.

Driver/Rider name: \_\_\_\_\_

Blood Type: \_\_\_\_\_ Medications: \_\_\_\_\_

Known Allergies: \_\_\_\_\_

Religious preference (not required): \_\_\_\_\_

Person to contact in case of emergency:

=====

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Relationship to Driver/Rider: \_\_\_\_\_

Home Phone : (\_\_\_\_\_) \_\_\_\_\_ Work Phone : (\_\_\_\_\_) \_\_\_\_\_

Cell phone, or any other means to contact this person:

\_\_\_\_\_

Will this person be at the event? YES / NO / NOT SURE (circle one)

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_