



SIGN-UP PACKET

BONNEVILLE 100 OPEN ROAD RACE

JUNE 25-26, 2010 – Wendover, NV



We welcome you to the Grid of the 2010 Bonneville 100 Open Road Race! You are invited to participate in a heart-pounding thrill ride of 101 miles of speed! We offer classes for all levels of driver, from the beginner to the professional. Enclosed is a packet of forms you will need to secure your spot on the 2010 grid. Included in this packet are:

- Bonneville 100 Entry Form
- Bonneville 100 Event Fees Form
- Medical Forms & Emergency Forms (fill out one of each, per person)
- Tire Form
- Preliminary Race Schedule
- Accommodations Flyer

Please complete the Entry Form, Fees Form, Tire Form, Medical Form(s) and Emergency Form(s), and return them to us, along with payment.

If you are a rookie driver, meaning you have never driven in and finished an open road race before, you are required to attend our Rookie Class on Thursday night, June 24, and you must sign up for (at extra cost), attend, and complete Rookie Qualifying on Friday morning, June 25. Refer to the schedule to make sure you arrive on time.

If you are unsure of what class you wish to enter or the requirements to enter a given class, refer to the rulebook online at <http://www.openroadracing.com/html/rulebook.html>.

We look forward to seeing you this summer!

Mike Borders
General Manager
MKM Racing Promotions, LLC
(702) 614-6108

P.S. The 2010 Rule Book will be released very soon on our Web site. Please read it carefully. A few of the key changes that you should be aware of are:

- All clothing in Touring and Grand Touring is now required to be non-synthetic, including underwear and socks.
- Arm restraints are now required in all cars that have race harnesses. This includes all Grand Touring cars.
- Balaclavas (head socks) are now required for all Super Sport participants.
- Many motorcycle helmets (not just M2000+) are now OK, in Touring Division only, and only if a balaclava is also worn. However, we will not accept any helmet that has only a DOT rating.
- Y-type and V-type racing shoulder harnesses are not permitted. Shoulder harnesses need to be two separate belts.
- Target Speed in SS1 is now 165 (was 160). The SS1 Tech Speed is now 185 (was 180). Target Speed in SS2 is now 175 (was 170). Tech Speed in SS2 is still 200.



Bonneville 100
Wendover, NV June 24-26, 2010
Entry Application



ENTRANT INFORMATION

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| DRIVER: Name: _____ Age: _____ Address: _____ _____ Home/Work phone: _____ Email Address: _____ Competition Licenses Held _____ Competition Experience: _____ _____ | NAVIGATOR / CO-DRIVER (circle which one) Name _____ Age: _____ Address: _____ _____ Home/Work phone: _____ Email Address: _____ Competition Licenses Held: _____ Competition Experience: _____ _____ |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

VEHICLE INFORMATION

Car Year: _____ Make: _____ Model: _____ Body Style: _____ Color: _____
(A color photo of vehicle must be submitted if this event is the first MKM Racing event for this vehicle)
 List races vehicle has participated in: _____

DIVISION SELECTED (example: Grand Sport): _____ **TARGET SPEED** (example: 145mph) _____
(Determines Minimum Safety Equipment Required) (See Rule Book for details)

SAFETY EQUIPMENT in the car: OEM Belts Racing Harness
 Fire Extinguisher Fire System Fuel Cell
 Roll Bar Roll Cage # Mounting Points: _____

Car Number preference: 1st choice: _____ 2nd: _____ 3rd: _____

I certify that the information above is correct and understand that any misrepresentation is grounds for disqualification from the event and forfeiture of my entry fee. I have read and understand the rules and regulations for this event.

(signed) Driver: _____ **Navigator/Co-Driver:** _____

For 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@openroadracing.com
www.openroadracing.com



MKM RACING EVENT FEE SCHEDULE

BONNEVILLE 100 June 24-26, 2010



NAME(s): _____

Current MKM lifetime member(s), please enter number(s) here: _____

| FEES | PRICE | QUANTITY | AMOUNT |
|-----------------------------------------------------------------------------|--------|----------|--------|
| 2010 MKM Membership Fee (Individual) (unless lifetime member) | \$35 | | \$ |
| 2010 MKM Membership Fee (Family) (unless lifetime member) | \$50 | | \$ |
| Base Entry Fee – Grand Sport and Super Sport classes (130-175 mph) | \$725 | | \$ |
| Base Entry Fee – Touring and Grand Touring classes (95-125 mph) | \$625 | | \$ |
| Fee for Navigator OR Co-Driver (circle which one) | \$170 | | \$ |
| Practice Road Fee (Optional) (not for Rookies, see below) | \$150 | | \$ |
| Rookie School/Qualifying Fee (MANDATORY for rookies, includes practice) | \$150 | | \$ |
| LATE CHARGE (if less than 15 days prior, or walk-in entry) | \$50 | | \$ |
| Discount for providing a Course Worker (each) (see reverse) | (\$50) | | \$() |
| Discount if paying fees by cash, check or M.O. | (\$30) | | \$() |
| | | | |
| SUBTOTAL (Fees) | >>>>> | >>>>>>>> | \$ |
| MERCHANDISE | | | |
| Top Speed Certificate (at Speed Trap) (Optional) | \$35 | | \$ |
| ALL MERCHANDISE BELOW MUST BE PRE-ORDERED TO GUARANTEE AVAILABILITY! | | | |
| T-Shirts (S M L XL) | \$20 | | \$ |
| T-Shirts (2XL 3XL 4XL) | \$22 | | \$ |
| MKM Polo Shirts (optional embroidered name, \$15 extra, special order) | \$40 | | \$ |
| MKM Jacket (includes name embroidered) (Special Order) | \$100 | | \$ |
| Hats (Bonneville 100) | \$25 | | \$ |
| Patches (MKM or Event sew-on patches, each) | \$20 | | \$ |
| | | | |
| | | | |
| | | | |
| SUBTOTAL (Merchandise) | >>>>> | >>>>>>>> | \$ |
| | | | |
| GRAND TOTAL to be paid | >>>>> | >>>>>>>> | \$ |

(SEE OTHER SIDE)

METHOD OF PAYMENT: Check Money Order
 Visa Mastercard American Express (sorry, no Discover cards)
 PayPal (paying fees online) Cash (do not mail cash)

CREDIT CARD # _____

Exp. Date: _____ (MM/YY)

Print Name exactly as on card: _____

Authorized Signature: _____

NOTES:

1. Enter the quantity of each item you are ordering in the "Quantity" column and the total cost of the item(s) in the "Amount" column. Add up the Fees (top part) and put the amount in the SUBTOTAL (Fees) box. Add up the Merchandise (bottom part) and put the total in the SUBTOTAL (Merchandise) box. Add up these two subtotals and put the total in the GRAND TOTAL box.
2. **Entry Fees must be paid in full no later than 15 days prior to the event or your entry will be subject to an additional \$50 LATE CHARGE.**
3. Refund policy for cancellations: If cancellation notice is given more than 30 days prior to the date of the event, a full refund of fees will be issued. For notice given from 30 days to 16 days prior, a 50% refund of fees will be issued. For notice given within 15 days or less, a 25% refund of fees will be issued. No refunds will be issued for no-shows who fail to notify us. In all cases, pre-ordered merchandise will be shipped; no merchandise refunds will be given except for speed certificate orders.
4. Merchandise prices include sales tax.
5. Banquet Tickets - There will not be a formal Awards Banquet this year. Trophies will be presented at a reception/party after the event. MKM will provide soft drinks, hot and cold hors d'oeuvres and other snacks, and there will be a no-host bar for adult beverages. See event schedule for time and place.
6. **COURSE WORKER DISCOUNT:** If you have team members or friends that would like to serve as Course Workers, you may take \$50 off your entry fees for each worker if they work separate gates. Enter the course worker's name(s) **HERE:**

For embroidered items, print EXACT name to be used:

Any questions, please call MKM Racing at 702-614-6108 in Las Vegas.

MKM RACING - MEDICAL INFORMATION FORM
(Must be completed by all Drivers, Co-Drivers and Navigators)

(note: all entrants must fill out a new form for 2010)



Name: _____

Address: _____

Date of Birth: _____ Age: _____ Sex: M / F (circle)

Height: _____ Weight: _____ Blood Type: _____ Date of last tetanus shot: _____

Allergies: _____

Drug Sensitivities: _____

Current Medications including eye drops and over-the-counter: _____

Medical Alerts: _____

Name of Personal Physician or Health Care Provider (**MANDATORY**): _____

Phone Number of Personal Physician or Health Care Provider (**MANDATORY**): _____

Insurance Provider & Policy Number (**MANDATORY**): _____

Vision: Right 20/____ Left 20/____ Both 20/____ With / Without Corrective Lenses (circle one)

HEALTH HISTORY – do you have now, have you ever had, or are you being treated for:

| Yes | No | | Yes | No | | Yes | No | |
|--------------------------|--------------------------|-----------------------|--------------------------|--------------------------|-----------------------------------------------------|--------------------------|--------------------------|--------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Asthma | <input type="checkbox"/> | <input type="checkbox"/> | High/Low Blood Pressure | <input type="checkbox"/> | <input type="checkbox"/> | Eye trouble, except glasses |
| <input type="checkbox"/> | <input type="checkbox"/> | Tuberculosis | <input type="checkbox"/> | <input type="checkbox"/> | Muscle/Skeletal Disease | <input type="checkbox"/> | <input type="checkbox"/> | Gastrointestinal disease/ulcer |
| <input type="checkbox"/> | <input type="checkbox"/> | Kidney disease | <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"/> | Diabetes | <input type="checkbox"/> | <input type="checkbox"/> | Psychiatric Disorder | <input type="checkbox"/> | <input type="checkbox"/> | Head or Spinal Injuries |
| <input type="checkbox"/> | <input type="checkbox"/> | Blood-Borne pathogens | <input type="checkbox"/> | <input type="checkbox"/> | Heart trouble/disease | <input type="checkbox"/> | <input type="checkbox"/> | Any other significant condition |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | Extensive confinement due to disease/illness/injury | <input type="checkbox"/> | <input type="checkbox"/> | Permanent disability from disease/illness/injury |

If any answer is Yes, explain here or attach separate sheet: _____

| | <u>Normal</u> | <u>Abnormal</u> | <u>Explain "Abnormal" here</u> |
|-----------------|--------------------------|--------------------------|--------------------------------|
| 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"/> | |

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

In accordance with Nevada Department of Transportation (NDOT) requirements, **ALL participants must provide proof of medical insurance from their health insurance provider or from their automobile policy, and this coverage must remain in effect for the duration of this event.** By signing this form below, you certify that the above is true and complete, that you are in compliance with the NDOT requirement, and further certify there are no physical or mental limitations to your participation in any MKM Racing Promotions, LLC event.

Participant Signature _____ Date _____

MKM USE ONLY



MKM RACING EMERGENCY INFORMATION FORM

Bonneville 100, June 25-26, 2010



Please completely fill out this form and send it back with your medical form.
Use a separate form for each participant: driver, co-driver, or navigator.
This information will be given to emergency response personnel.

PARTICIPANT:

Name: _____

Sex: M F (circle one) Age: _____ Blood Type: _____

Medications currently taking, including eyedrops and over-the-counter: _____

Known allergies or drug sensitivities: _____

Religious preference (not required): _____

PERSON TO CONTACT in case of emergency: (Is this person at the event? YES NO)(circle one)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Relationship to Participant: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

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

Notes



MKM RACING
Preliminary Schedule of Events
Bonneville 100 Open Road Race
June 24-26, 2010



Revised 4/14/2010

All Times are Pacific Daylight Time! Please note that although the Wendover area operates on Mountain Time, the race does not!

THURSDAY 6/24

4:00 PM – 7:00 PM

Early Registration – Wendover Nugget Convention Center (WNCC) --
Upstairs

4:30 PM – 7:00 PM

Early Tech Inspection – 1st Come, 1st Served Covered Parking Lot Utah Side
Rookie Classroom Orientation (**Mandatory for Rookies**) -- WNCC

7:00 PM – 8:00 PM

FRIDAY 6/25

7:00 AM – 1:00 PM

Registration – WNCC - Upstairs

7:00 AM – 8:00 AM

Tech Inspection (Rookies and Instructors ONLY)

8:00 AM – 9:00 AM

Tech Inspection (Practice Participants ONLY)

9:00 AM – 9:30 AM

Meeting for Practice / Qualifying Participants (**Mandatory**)

9:00 AM – 1:00 PM

Tech Inspection – All Racers – Check your Tech Time

9:30 AM

Practice/Qualifying cars report to Practice Grid Area
(Old NDOT Yard, MM 30.2)

9:30 AM – 10:30 AM

Rookie Only Qualifying

10:30 AM – 3:30 PM

Practice/Qualifying (all others)

4:00 PM – 5:00 PM

Navigator Training Class (Optional) -- WNCC

5:00 PM – 5:45 PM

Course Control Officials Meeting -- WNCC

6:00 PM – 6:30 PM

Drivers Meeting (**Mandatory for all Drivers/Co-drivers/Navigators**) - WNCC

6:30 PM

Welcome Racers Party - WNCC

SATURDAY 6/26

5:00 AM

Course Control Officials report /issue equipment and
proceed to Gates – WNCC

6:00 AM

Course Closed - Sweeps begin, comm checks begin

6:45 AM

GS, GT, T, Divisions to pre-grid

7:15 AM

Call-up to Final Grid – for GS, GT, T Divisions

7:45 AM

Emergency & Communications Vehicles/Teams in place

8:00 AM

Green Flag Leg 1, GS, GT, T Divisions

8:15 AM

SS1, SS2 to starting grid/unload area

10:00 AM

Green Flag Leg 1 for SS1, SS2

10:45 AM

Leg 1 complete

11:15 AM

Green Flag Leg 2, GS, GT, T Divisions

1:15 PM

Green Flag Leg 2, SS1, SS2

2:00 PM

Event Complete

5:30 PM

Awards Party – WNCC - Upstairs

ALL TIMES ARE PACIFIC DAYLIGHT TIME!!!



MKM RACING 2010 TIRE INSPECTION FORM Bonneville 100



This form must be completed and returned with your entry packet.

NAME _____ CAR # (if known) _____

YEAR, MAKE, MODEL of CAR _____

TARGET SPEED _____ TECH SPEED LIMIT _____

MAKE OF TIRE (Michelin, Yokohama, etc.) _____

MODEL OF TIRE (AVS, MXX3, Eagle GT, etc.) _____

COMPLETE SIZE & RATING DESIGNATION from sidewall (example: P275/40ZR17 98Y):

FRONT _____ REAR _____

LOAD RATING (pounds) FRONT _____ REAR _____

MAXIMUM INFLATION PRESSURE (psi) FRONT _____ REAR _____

TREAD DEPTH (in 32nds of an inch) FRONT _____ REAR _____

CURRENT MILEAGE FRONT _____ REAR _____

DATE OF PURCHASE FRONT _____ REAR _____

DATE CODES LF _____ RF _____ LR _____ RR _____

We strongly recommend not using tires greater than 4 years old. 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. . A low tire pressure warning system is highly recommended.

Load Carrying Capacity: All tires must have an equal or greater load carrying capacity than the car's original OEM-spec tire. (Example: if the base tire for a car is a P205/65R15 rated @ 1400 lbs, then any replacement tire for that car must also have a load rating of at least 1400 lbs., regardless of the speed rating or Division/Class in which the vehicle is competing.)

Racing Tires: Because racing tires do not have load or speed ratings, those who wish to use such tires must submit the type of vehicle, the vehicle's top speed, and the intended tire sizes to MKM for **pre-approval**.

West Wendover, NV Accommodations 2010 list

Room rates not guaranteed and are subject to change



Wendover Nugget Hotel and Casino

**Reservations: 775-664-2221 or 800-848-7300
775-664-4689 Fax**

**Restaurants, Fine Dining, Buffets, Deli, Snack Bar, Outdoor Pool
RV Park book thru Hotel**

**2010 Room Rates: \$40.00 plus tax per night Sun.-Thurs.
\$80.00 plus tax per night Fri. and Sat.**

Ask for Code MKM 10

Montego Bay Hotel & Casino

Reservations: 775-664-9100 or 800-217-0049

Book rooms online www.wendoverfun.com

Restaurant, Buffet, Snack Bar, Steak House, & Indoor Pool

Peppermill Casino

Reservations: 775-664-2255 or 800-537-0207

Book rooms online www.wendoverfun.com

Restaurant, Buffet & Snack Bar

Rainbow Hotel & Casino

Reservations: 775-664-4000 or 800-537-0207

Book rooms online www.wendoverfun.com

Restaurant, Buffet, Snack Bar, Steak House & Indoor Pool

America's Best Value Inn

Reservations: 775-664-2888 or 888-315-2378

Pets Welcome

Camping Facilities: KOA

Reservations: 775-664-3221 or 800-562-8552

RV, Cabins, & Tent Sites

Outdoor Pool. playground. Convenience Store

Wendover, UT Accommodations

Days Inn

Reservations: 435-665-2215 or 800-329-7466

AAA & AARP, Indoor Pool, Continental Breakfast,

Motel 6

Reservations: 435-665-2267 or 800-4motel6

Outdoor Pool

Best Western Salt Flat Inn

Reservations: 435-665-7811 or 800-528-1234

AAA & AARP, Outdoor Pool

Quality Inn

Reservations: 435-665-2226

Pets Welcome, Outdoor Pool

Western Ridge Motel

Reservations: 435-665-2211

Pets Welcome