



Date: \_\_\_\_\_



## 2025 Summit Index Series presented by 501 Performance

### Points Registration Form

**CLASS:** \_\_\_\_\_

**Full Name:** \_\_\_\_\_ **Spouse:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_ **Do you text?** Yes / No **Other Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Shirt Size:** \_\_\_\_\_ **Jacket Size:** \_\_\_\_\_ **Sweatshirt Size:** \_\_\_\_\_

**IHRA/NHRA License #** \_\_\_\_\_ **Expires:** \_\_\_\_\_

**Car Year:** \_\_\_\_\_ **Make:** \_\_\_\_\_ **Model:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Car #** \_\_\_\_\_

**Class (mark with x):**

**Registration MUST be accepted  
before you will receive points**

<input type="checkbox"/> 5.50	\$75
<input type="checkbox"/> 6.00	\$75
<input type="checkbox"/> 6.50	\$75
<input type="checkbox"/> 7.00	\$75

#### Track Official Use Only

Date Accepted \_\_\_\_\_

IHRA Verified \_\_\_\_\_

By \_\_\_\_\_

Amount Paid \_\_\_\_\_

Mailing Address: P.O. Box 571, West Salem, OH 44287