



STAFFORD MOTOR SPEEDWAY

55 West Street • P.O. Box 105 • Stafford Springs, CT 06076
Phone: 860-684-2783 • Fax: 860-684-6236
Email: smsonline@staffordspeedway.com
www.staffordspeedway.com

2012 SEASON PADDOCK PERMIT APPLICATION

PLEASE PRINT OR TYPE

NOTE: All permits will be sent to address of name #1.

CAR #: _____ [] SK-MODIFIED [] LATE MODEL [] SK-LIGHT [] LTD. LATE MODEL [] DARE STOCK

Future Season Pass Applications will be sent to you via e-mail.

Please provide a working e-mail address in this space so that we may add it to our records.

E-MAIL ADDRESS: _____

NAME #1 _____ DATE OF BIRTH ____/____/____

STREET: _____ PHONE (____) _____

CITY: _____ STATE: _____ ZIP: _____

NAME #2 _____ DATE OF BIRTH ____/____/____

STREET: _____ PHONE (____) _____

CITY: _____ STATE: _____ ZIP: _____

NAME #3 _____ DATE OF BIRTH ____/____/____

STREET: _____ PHONE (____) _____

CITY: _____ STATE: _____ ZIP: _____

(Use back side for additional names)

UPGRADE OPTION

Permit Fee: \$465.00 If purchased from December 17, 2011 to March 16, 2012.....Add reserved seat - \$35.00

\$515.00 If purchased from March 17, 2012 through May 11, 2012.....Add reserved seat - \$35.00

____ Please check here if you wish to renew your current reserved seat location. Sect. _____ Row _____ Seat _____

____ Please check here for a new seat upgrade and indicate your preferred seat location. Sect. _____ Row _____ Seat _____

A REPLACEMENT FEE OF \$20.00 WILL BE CHARGED FOR ANY CARD THAT IS LOST OR STOLEN.

**GOOD ONLY FOR STAFFORD NASCAR & ISMA RACING EVENTS –
NOT GOOD FOR MONSTER TRUCKS, WILD THING KARTS, SWAP MEETS, OR PASS EVENTS**

NUMBER OF PERMITS: _____ AMOUNT ENCLOSED (Please incl. \$3.00 for S & H): \$ _____

PLEASE MAKE CHECKS PAYABLE TO: **STAFFORD SPRINGS ENTERPRISES., INC.**

[] MASTER CARD [] VISA [] AMERICAN EXPRESS [] DISCOVER

CARD HOLDER'S NAME: _____

CARD #: _____ EXP. DATE: _____ SECURITY CODE: _____

ADDRESS OF CREDIT CARD: _____

CITY: _____ STATE: _____ ZIP: _____

SIGNATURE: _____

NAME #4 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #5 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #6 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #7 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #8 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #9 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #10 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #11 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #12 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #13 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____

NAME #14 _____ DATE OF BIRTH ____/____/_____
STREET: _____ PHONE (____) _____
CITY: _____ STATE: _____ ZIP: _____