

2009 Stellar Luminescence Entry Form

Please print clearly.

	driver	navigator
name	_____	_____
address	_____	_____
city, st, zip	_____	_____
E Mail	_____	_____
Cell phone	____ - ____ - _____	Cell phone ____ - ____ - _____

CLUB AFFILIATION: _____ CLASS: _____

Make Checks payable to ITN. Send completed applications and payment to

ITN

P.O. Box 642261

Los Angeles, CA 90064

For credit card entries, please complete the section below.

Credit Card type (circle one) Visa Mastercard

Amount enclosed/approved: _____ Credit card number*: _____

Signature: _____ Expiration date: _____

Name on Card _____