



SRA Go-PED/QUAD RACING PRE RACE TECH FORM

Driver Name: _____

Race Number: _____

Date: ___/___/20

Classes: Hard Tire:___ Small Bore Air Tire:___ Big Bore Air Tire:___

Spindle Quad:___ Jr Quad:___ LW Quad:___ HW Quad:___ Ultimate Quad:___

Novice Quad:___ Novice Sport:___ Novice AirTire:___

Number Plate Affixed as per the rules: _____ (Initial)

Seat Affixed with min 4 mounting points: _____ (Initial)

Throttle Return Spring In Place: _____ (Initial)

Gas Tank mounted securely: _____ (Initial)

Engine to Spec as per rules/class: _____ (Initial)

Front Width Measured as per rules: _____ (Initial)

Rear Width Measured as per rules: _____ (Initial)

Overall Length Measured as per rules: _____ (Initial)

Full Face Helmet/Open Face With Goggles: _____ (Initial)

Knee Pads: _____ (Initial)

Elbow Pads: _____ (Initial)

Gloves: _____ (Initial)

Proper Shoes: _____ (Initial)

Proper Clothing: _____ (Initial)

Signature, All items initialed are in proper order. Lets Race!!!

Signature