



LEGEND CARS



Track: Caraway Speedway

Race Date: Saturday, November 8, 2025

Location: 2518 Race Track Rd Ext., Sophia, NC

Registration: 7:00 am; **Pits Open:** 7:30 am

Rules: INEX Legend Car Rules

Races Start: 1:00 pm **Distance:** 30 Laps

Thurs Nov. 6 & Friday Nov. 8: Option Practice

Promoter: DAH Motorsports, LLC / Caraway Speedway

Purse Distribution

1. \$1,000	4. \$150	7. \$90	10. \$60
2. \$350	5. \$125	8. \$80	11. \$50
3. \$175	6. \$100	9. \$70	12.-24. \$50

ENTRY / ADVERTISING RELEASE: The undersigned understand and agree that: 1) Their name/likeness may be used by NSS/DAH Motorsports to promote this event. 2) All decisions made by NSS officials are final and without recourse. If this application is terminated, it shall be without restitution of any part of the fee paid in connection with this entry and further waives all rights or claims to any purse and/or bonus money due or resulting from racing efforts with NSS prior to NSS termination. The undersigned further waives all rights for themselves, their agents, or assigns, to institute any action, suits, or proceedings, whether at law or otherwise, against NSS and its officers, directors, agents, and employees for any and all causes of action, suits, damages, and claims that the undersigned or their heirs, successors, or assigns may have now or in the future, arising in any manner from NSS-promoted events— excepting DAH's obligation to pay purses, bonuses, and awards as set forth in official entry blanks for NSS-promoted events. The undersigned understands and agrees that this release constitutes a waiver of all claims for personal injury, breach of contract, and any other loss or damage except as expressly provided herein.

Purse Payable to: ☐ Owner ☐ Driver **Applicable SS#/EIN:** _____

DRIVER: _____ **Email:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____ **Cell #:** _____

OWNER: _____ **Email:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____ **Cell#:** _____

SPONSOR(s): _____

Signature(s):

DRIVER: _____ **CAR OWNER:** _____

DATE: _____

Rent AMB: Y or N

ENTRY FEE: \$25 (NON-REFUNDABLE)

Checks payable to: DAH Motorsports LLC or Caraway Speedway **COMPLETE THIS ENTRY BLANK AND RETURN TO:**
Caraway Speedway – 2518 Race Track Rd Ext., Sophia, NC 27350 Must be paid with entry form & W9 **NOTE:**

Attendance at

Driver's Meeting is **MANDATORY**.

Contacts: Darren Hackett: 336.302.5848 • Tina Lackey: 336.847.5292