

2006 POLARIS SNOCROSS RACE SCHOOL

WHEN: Friday, October 28, 2005
or
Saturday, October 29, 2005

WHERE: The Plaza Hotel & Suites
201 North 17th Avenue
Wausau, WI 54401
715-845-4341 or 715-845-5773

Registration: 8:00 a.m.
School starts: 9:00 a.m. and ending approximately 5:00 p.m.
Cost: \$50.00 per person

In an effort to meet your needs we are once again offering the 2006 Polaris Race School on two separate days. Friday, October 28th and Saturday October 29th at the Plaza Hotel and Suites in Wausau, Wisconsin. Every effort will be made to accommodate the date you request, however due to space limitations your preferred choice may need to be rescheduled. You will receive confirmation of scheduled date by mail.

BECAUSE OF THE CHANGES WE MADE ON THE 06 VEHICLE WE STRONGLY ENCOURAGE ATTENDING THIS YEARS' RACE SCHOOL.

The cost for the 2006 Polaris Race School will remain at \$50.00 per person and is limited to drivers and one mechanic. Seating is limited and will be on a Pre-Registered, Pre-Paid basis only. A 2006 440 High Performance Manual and lunch will be provided. 2006 Polaris race clothing, parts and race fuel will be available for purchase on site, as well as representatives from various aftermarket suppliers and race affiliates.

Discounted blocks of rooms at the Plaza Hotel & Suites have been reserved. When phoning in reservations mention group block number 8917. Hotel driving directions are enclosed.

Registration deadline date is Friday, October 14th, 2005. No credit cards accepted and payment must accompany race school application. No refunds will be made after October 29th.

Please mail the enclosed registration form and a check payable to Polaris Racing to the following address:

POLARIS RACING
ATTN: RACE SCHOOL
10303 CALUMET AVENUE, SUITE 3
MOSINEE, WI 54455

2006 SNOCROSS RACE SCHOOL APPLICATION

First Choice: _____ Friday, Oct. 28, 2005

_____ Saturday, Oct. 29, 2005

Drivers Name: _____

Mailing Address: _____

City: _____ State: _____

Zip: _____

Phone #: _____

Mechanics Name (If attending Race School): _____

Mailing Address: _____

City: _____ State: _____

Zip: _____

Phone #: _____