



# 2018 EQUIPMENT ORDER FORM

Please Print Legibly

Date:	_____
Fee:	_____
Pmt Type:	_____
Approval:	_____
Delivery:	_____

Team Name: \_\_\_\_\_ Car Number: \_\_\_\_\_

Entrant's Name: \_\_\_\_\_  
(First Name) (Last Name)

Address (If Shipping is Required): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Work Phone #: \_\_\_\_\_ Mobile #: \_\_\_\_\_

## **PROTOTYPE CHALLENGE EQUIPMENT** (Required items)

**QTY:**

- MSE Yellow Light Kit – Wire Harness, Light & Antenna - \$385 \_\_\_\_\_
- Driver ID Transponder Kit (all installation items & 3 Driver ID plugs included) - \$2225 \_\_\_\_\_
- T&S Wireless Router – (required for Pit Box to Race Control messaging system) - \$275 \_\_\_\_\_

## **GT3 CUP USA & CAN EQUIPMENT** (Required items)

- MSE Yellow Light Kit – Wire Harness, Light & Antenna - \$385 \_\_\_\_\_
- T&S Wireless Radio – \$100 \_\_\_\_\_
- Timing Transponder with 1 Year Subscription - \$280 \_\_\_\_\_

## **LAMBORGHINI SUPER TROFEO EQUIPMENT** (Required items)

- MSE Yellow Light Kit – Wire Harness, Light & Antenna - \$385 \_\_\_\_\_
- T&S Wireless Radio - \$100 \_\_\_\_\_
- Timing Transponder with 1 Year Subscription - \$280 \_\_\_\_\_
- Driver ID Transponder Kit (all installation items & 3 Driver ID plugs included) - \$2225 \_\_\_\_\_

## **FERRARI CHALLENGE EQUIPMENT** (Required items)

- MSE Yellow Light Kit – Wire Harness, Light & Antenna - \$385 \_\_\_\_\_
- Timing Transponder with 1 Year Subscription - \$280 \_\_\_\_\_

**TOTAL \$** \_\_\_\_\_

**Payment Information**

\_\_\_\_\_ Please charge the Equipment Fee(s) to the credit card provided to IMSA under the Automatic Payment Authorization Form.

\_\_\_\_\_ I would like to pay by a credit card that is not on file with IMSA.

**I authorize IMSA to charge the credit card listed below for the total amount listed above. I certify that I am the legal owner of this credit card. By signing this order form, I understand that the total amount above will be charged today and is non-refundable.**

Signature: \_\_\_\_\_

Print: \_\_\_\_\_

IMSA Official: \_\_\_\_\_

Date: \_\_\_\_\_

**Credit Card Information**

Name on Credit Card: \_\_\_\_\_

Pin Number: \_\_\_\_\_

Last 4 Digits of Credit Card Number: \_\_\_\_\_

**Please email form to Sarah Serle at [sserle@imsa.com](mailto:sserle@imsa.com)**