

Kansas Speedway
Season Ticket Transfer Request Form
*****Season Ticket Transfers accepted between**
November 01, 2016– February 1, 2017***

Account # _____ **Current** Account Holder: _____

Address: _____

City _____ State _____ Zip Code _____

Home Phone # _____ Work Phone # _____

Number of seats transferring: _____ Section: ___ Row: ___ Seat(s): _____

Signature of **Current** Ticket Holder _____

The current ticket holder named above hereby releases all tickets and privileges associated with the number of tickets described above to:

New Ticket Holder: _____

(accounts **cannot** be set up with multiple names, one (1) name only per account)

Company Name (if applicable): _____

Address: _____

City _____ State _____ Zip Code _____

Home Phone # _____ Work Phone # _____

E-Mail Address _____

Does **New** Season Ticket Holder currently have tickets with Kansas Speedway or other ISC tracks? ___ Yes ___ No (If yes, please provide Account # _____.)

A copy of the current Account Holders photo I.D. is required and must be submitted with this completed form.

- **Failure to submit completed form along with photo I.D. will result in delay of transfer.**
- **2017 Season Tickets must be paid in full prior to transfer.**

Mail To: Kansas Speedway, Attn: Dawn Watkins, 400 Speedway Blvd., Kansas City, KS 66111 or

Fax: 913-328-3380