

2020 Nationals Refund Form

Name of person who is filling out this form: _____

Fill Name/Address as written on your entry

Name _____

Address _____

City _____ State _____ Zip _____

Vehicle Entry Type: Car [] Race [] Judged []

Vendor Entry Type: Swap Meet [] Midway []

Amount \$ _____

Name to be written on refund check: _____

Send Refund to above address []

Send Refund to the address below;

Name _____

Address _____

City _____ State _____ Zip _____

Please allow 5-6 weeks for Processing/Delivery

E-Mail this form to: NationalsRefund2020@yahoo.com

Save the completed form as a new file name, example: "My Name".pdf

Attach the new named form file to your e-mail

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