



Revised: 06/01/2022

Local Race Sanction Application

Name of race city: _____ State: _____

Requested Race Dates: _____

Estimated Entries Per Division:

Stock _____ Super Stock _____ AA Masters _____ Other _____

Last Day to Register: _____

Race site or location (street/track) _____

Race Director _____

Director's Address (street) _____

City _____ State _____ Zip Code _____

Phone _____ email _____

Insurance certificate information

Issued in name of _____

Street _____ Phone _____

City _____ State _____ Zip Code _____

Select Sanction Fee Option:

1 Day - \$200

2 Day - \$300

Please contact Thomas Thomes at 614-975-5630 if you have any questions. Make checks payable to National Derby Rallies, Inc. (NDR). Send completed form and check to:

NDR

c/o Thomas Thome

5384 OConnel St

Canal Winchester, OH 43110

I hereby agree to direct this (these) race(s) to comply with the rules and procedures as set forth by the National Derby Rallies, Inc., as outlined in the NDR Race Manual and the current NDR Rule Book.

Signed _____ Date _____

For NDR use only

Date Received _____ Check # _____ Check Date _____ Packet Mailed _____