

2026 SMVR MEMBERSHIP APPLICATION FORM

(please print legibly!)

Name - _____ **D.O.B.** - _____

Spouse Name - _____

Address - _____

City/State/Zip Code - _____

Cell Phone # - (_____) _____ - _____

Email - _____

Car Year - _____ **Make** - _____ **Model** - _____

Car Color - _____ **Engine Make & Size** - _____

Car # _____ (Existing/Active SMVR Member Numbers are Grandfathered, and you may have to add a letter if the number currently exists).

Driver History Info – (Championships, years racing, etc)

Sponsors - _____

SMVR MEMBER DUES ARE \$40.00 PER YEAR (Dues must be paid before member can race an SMVR race) No Pay, No Play!

Paid member will be able to race at all S.M.V.R. sponsored event, attend and vote at meetings.

Make checks payable to **SMVR**

Mail to: **Jim Thorne, 15912 206th Street, Tonganoxie KS 66086**

I THE UNDERSIGNED, HEREBY RELEASE AND HOLD HARMLESS THE OFFICERS AND MEMBERSHIP OF THE SHOW ME VINTAGE RACING SERIES AND THE TITLE SPONSOR OF ANY AND ALL RESPONSIBILITY FOR ANY DAMAGES OR INJURIES THAT I THE OWNER AND/OR THE DRIVER MAY SUSTAIN AT ANY S.M.V.R. EVENT.

Signature – Car Owner or Driver Only