2024 PRO 4 Modified Team Registration

PLEASE PRINT ALL INFORMATION CLEARLY. The information provided is used for club purposes and will be provided to track officials, if you want it to be said correctly it needs to be legible. Information can be changed or corrected as needed.

Email Address:	
Drivers Name:	Age Car Number: 1^{st} 2^{nd}
Mailing Address:	
City: Stat	e: Zip Code:
Phone (Preferred):	(Secondary):
Information to be provided to track offici	als
Hometown:	State:
Car Owner (if different than driver):	
Crew Chief (if applicable):	
Sponsors:	

I hereby certify that all statements and information provided by me on this form are complete and true to the best of my knowledge. Additionally, I understand that race cars and racing are inherently dangerous, and my participation could result in serious injury or death, understanding this, I agree to hold harmless this organization, its members, agents, officials, volunteers, or employees from any liabilities resulting from racing a legal car. Any parts or services sold or performed on credit will be the responsibility of the car owner and driver(s). All actions of the driver, crew and car owner will be the responsibility of the car owner.

Car Owner Signature:	Date:
Car Driver Signature:	Date:

Registration fees:

- _____ \$125 Club Fee (due at time of first race)
- _____ \$25 Additional driver Fee (can be added during season)
- _____ \$100 Season Transponder Rental (\$10 per race otherwise, Deducted from purse)

Make Payment Payable to Timothy Thibault. Cash Accepted as well. Return form and Payment to: Timothy Thibault, 30 Old Coach rd., Millville, Ma 01529