

Driver:		
Car#		
Date of Birth:		
Class: (Please Circle)		
Kid Kart		Kid Sportsman Predator
Box Stock		Sportsman
Junior Sportsman		Senior Sportsman
Mini Cup		Junior Mini Cup
Parent's Name:		
Email:		
Phone:		
Series: Please circle which series do you plan to run?		
Friday	Sunday	Both
*** Office Use Only ***		
Birth Certificate: Yes or No		Parental Consent Signed: Yes or No
Last Safety Check:	<u> </u>	Transponder#