



\$75 per 6729 E 175 N Monticello, In
47960
Division 219-863-668
MiamiCountyRaceway.com

2024 Membership

Please print clearly in black or blue ink and fill out ALL blanks.

DRIVER INFORMATION

_____ Name		_____ Birthdate		_____ Division(s)		_____ Car #	
		<small>(Drivers under the age of 18 (this date 2024) Must complete a Minor Release Form)</small>					
_____ Street Address		_____ City		_____ State		_____ Zip	
_____ Phone #		_____ SSN/FEIN		_____ Email Address		_____	
_____ Emergency Contact Name				_____ Emergency Contact Phone Number			

OWNER INFORMATION

_____ Name		Pay Owner – YES / NO (Circle One)					
_____ Street Address		_____ City		_____ State		_____ Zip	
_____ Phone #		_____ SSN/FEIN		_____ Email Address			

SPONSORS

_____	_____
_____	_____
_____	_____
_____	_____

BY SIGNING THIS ENTRY FORM, DRIVER & OWNER AGREES TO ABIDE BY ALL TRACK RULES AND REGULATIONS !

DRIVER'S SIGNATURE: _____

OWNER'S SIGNATURE: _____

Date: _____

Date: _____

Fill this form out and email to 38wood50@comcast.net