



2024 Membership Application

Driver's Full Legal Name:			Car #:
Racing Name (If different):		Transponder #	ŧ
Mailing Address:			MRP Card: Yes No
City:		State:	Zip:
Birth Date: Age:	SSN:		
Cell Number:	_Email:		
Gender: Male Female Rookie: Yes	No Jacket S	Size: S M L XL 2X	3X 4X
In Case of Emergency Notify:			
Name:		Phone Number:	
Person/Business to I	Receive 1099	(If different from [Driver)
Full Legal Name:			
Mailing Address:			
City:			
Birth Date:	SSN/TI	N:	
Phone Number:	_Email:		
Merritt Speedway		Tri-City Mo	tor Speedway
Pit Spot \$150 #		Pit Spot \$150 #_	
O UMP Late Models \$100		UMP Late Mode	
O IMCA Modifieds \$75		O IMCA Modifieds	
O Pro Stock \$75		O Pro Stock \$75	
Factory Stock \$75		Factory Stock \$7	'5
○ 4-6 Cylinder \$75		🔘 4-6 Cylinder \$7	75
Merritt Speedway 231-842-7223		IMCA Mod Licer	nse? YES No \$ <u>130.00</u>
Tri-City Motor Speedway 989-316-6804		Payment Type: Cash	Card Check #
PO Box 329, Cadillac MI 49601			Amount \$