LAKES REGION ICE RACING CLUB DRIVER INFORMATION

(Please print)

Stock #	Modified #	Sprint Car #	FWD #	RWD #	Junior #	
	Membe	rship Fee: \$50.00 p rship Fee: \$75.00 af ily Driver: \$20.00 p	ter the Sandwic			
Name		Mailin	g Address			
Physical Add	dress	City/Town				
State	ZipI	Home telephone ()	Date of Birth		
Cell Telepho	one ()	EmailAddress(optional)				
any decision	s rendered by the office	gulations as set forth b cers of this club. I fur ponsible for any perso	ther understand th	at I race at my own	risk and the	
	participation in these				CONTROL MANUEL AND ADDRESS COLORS	
Signature			Date			
Person to con Name	ntact in case of an em	ergency – <u>DO NOT L</u> Tele	ency – <u>DO NOT LEAVE BLANK!!!!</u> Telephone #		Relationship	
1.	THE STATE OF CHAPTER SHOULD BE AND ADDRESS.	**************************************				
2.	estimosponarios estados de Sala (1888) e (1888)					
Any medical	conditions?? Explain	n				
Any medicin	nes you cannot take?_					
		?				
LRIRC use only						
N	Iember	Date		Paid		
D	Daily Driver	Date	Amoui	nt Paid		