



Kearney Raceway

Driver/Points Registration Form

Car Number:

Please Print in Ink - Fill Out Completely
(*Required Fields)

*Drivers Name: _____ M - F *Date of Birth: ___/___/___ Age: ___

*Mailing Address: _____ Apt#: _____

*City: _____ State: _____ Zip: _____

*Drivers License#: _____ *SSN: _____ - _____ - _____ or Federal ID#: _____

*Phone #:(____)____ - _____ and/or Cell#:(____)____ - _____

*Email: _____

| | | | | | | |
|---------------|---|---|---|----|-----|------|
| T-shirt Size: | S | M | L | XL | XXL | XXXL |
| Jacket Size: | S | M | L | XL | XXL | XXXL |

Vehicle Information

Vehicle Make: _____ Model: _____ Year: _____

Engine Make: _____ CI/CC: _____ HP: _____ Builder: _____

Sponsors: _____

Racer Accomplishments: _____

Registration fees per class

- | | | |
|---|---|---|
| <input type="checkbox"/> Super Pro - \$70 | <input type="checkbox"/> Street Legal- \$40 | <input type="checkbox"/> Jr. Street - \$40 |
| <input type="checkbox"/> Pro - \$60 | <input type="checkbox"/> Motorcycle - \$40 | <input type="checkbox"/> Jr. Dragster(10-17) - \$40 |
| <input type="checkbox"/> Sportsman - \$50 | <input type="checkbox"/> High School - \$40 | <input type="checkbox"/> Jr. Dragster(8-9) - \$40 |

Total: \$ _____

| | |
|-----------------------------|-----------------------|
| Paid By: Cash / Check | Staff Initials: _____ |
| Check Number: _____ | Date: ___/___/___ |
| Authorized Signature: _____ | |

Mail To:
Kearney Raceway Park - 724 Maberly St. - Holdrege, NE 68949 - (308)750.2049