

DEER CREEK SPEEDWAY 2018 DRIVER INFO

(Please return)

*LAST NAME _____

*FIRST _____ MIDDLE INITIAL _____

*FULL MAILING ADDRESS _____

*CITY _____ STATE _____ ZIP _____

SOCIAL SECURITY# _____ DATE OF BIRTH _____

DRIVER'S AGE _____ HOME PHONE# _____

*CELL PHONE# _____ *E-MAIL _____

AMB TRANSPONDER# _____

CHECKS PAYABLE TO (IF DIFFERENT THAN DRIVER) _____

SOCIAL SECURITY# OR FEDERAL ID # _____

FULL MAILING ADDRESS _____

DO YOU PLAN ON RUNNING FOR KING OT THE CREEK? YES NO

CAR CLASS _____ CAR # _____ LIC# _____

EMERGENCY NAME AND PHONE# _____

EMERGENCY NAME AND PHONE# _____

COMPETITORS SIGNATURE _____ DATE _____

ALL OF THE INFORMATION ABOVE IS CONFIDENTIAL AND IS USED FOR TAX PURPOSES ONLY, WITH THE EXCEPTION OF THE FOLLOWING BELOW. THANK YOU, DEER CREEK SPEEDWAY MANAGEMENT

*I understand from time to time Deer Creek Speedway L.L.C., its sponsors, and partners may send e-mail, text messages, or mail to me that contain information on Deer Creek Speedway, products and services available to me, and race day updates. Standard text messaging rates would apply for text messaging. If you do not want to receive this info please check here ____.

Deer Creek Speedway L.L.C.
PO Box 591
Grand Meadow, MN 55936
Track (507) 346-2342
Office (507) 754-6107
Fax (507) 754-5814
www.deercreekspeedway.com