



11631 12th Road
Plymouth, IN 46563
574-936-0900

2019 REGISTRATION FORM

Car Number # _____
Must compete in 60% of Plymouth Speedway's Saturday
scheduled points events to qualify for points fund.

Rookie Candidate _____
Must have less than 6 previous career starts in division
Register for Rookie Candidate by 2nd participating race weekend

Class (Circle One) : Modified CSR Sprints Street Stock Thunder Stock 600 NW Sprint

Driver's Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

E-Mail Address: _____

Phone: (_____) _____

Are you at least 18 years old? Yes No **(Parental Release required)**

**INFORMATION FOR: SOCIAL SECURITY OR TAX I.D. NUMBER OF PERSON OR ENTITY TO RECEIVE 1099
(PAYOFF CHECKS MADE OUT TO)
W-9 Required To Receive Check From Plymouth Speedway**

Name or Entity: _____
Note if owner/payee is same as driver just state "SAME", note legal name is required for payee

E-Mail Address: _____

Phone: (_____) _____

Sponsors:

Racing Accomplishments: (Championships, Tracks raced, Races won, Track records, Series raced in)

Disclaimer: I understand that my signature here makes me a member of Plymouth Speedway. I agree to abide by the racing rule book of Plymouth Speedway and its interpretation by officials. I hereby give my permission to use photographs of myself and/or race car as part of their racing publicity promotions. I agree not to hold Plymouth Speedway responsible for disqualification or damage to either car or driver and I agree that I consider the track is in safe racing condition when I take part in any racing activity.

***Note: Checks will be made payable to the person listed on your registration form as the recipient of the 1099.**

Signature: _____ **Date:** _____