



DRIVER/CAR OWNER INFORMATION SHEET

(PLEASE PRINT, FILL OUT BOTH SIDES & RETURN WITH \$100 FEE)

CAR #: _____

COLORS: _____ DATE OF BIRTH: _____

DRIVER: _____ JACKET SIZE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CELLPHONE: _____

DAYTIME PHONE #: _____ EVENING PHONE#: _____

FAX PHONE #: _____ E-MAIL ADDRESS: _____

WEB SITE ADDRESS: _____

DRIVER EXPERIENCE (Years Racing, Types of Cars Raced, Championships, Etc. Use reverse side if needed):

CAR OWNER: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CELLPHONE: _____

DAYTIME PHONE #: _____ EVENING PHONE#: _____

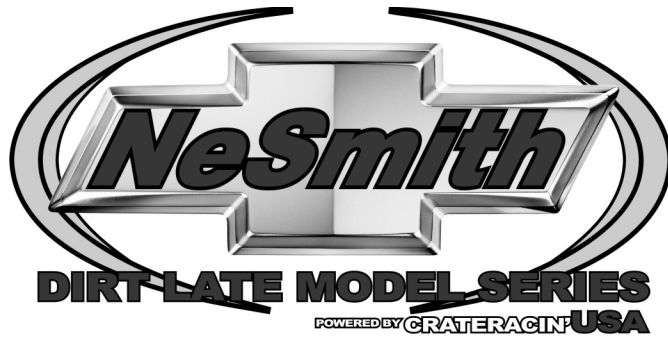
FAX PHONE #: _____ E-MAIL ADDRESS: _____

1099 RECIPIANT (Please Check One): DRIVER _____ CAR OWNER _____

TAX I.D. # or SSN OF 1099 RECIPIANT: _____

P.O. Box 1346, Cartersville, GA 30120
Mike Vaughn: 770-560-1240 or Roby Helm: 865-207-4157

www.nesmithracing.com



RACE CAR INFORMATION:

PRIMARY SPONSOR: _____

SECONDARY SPONSORS: _____

CHASSIS: _____ **ENGINE MODEL (602 or 604):** _____

CREW CHIEF: _____

CREW MEMBERS: _____

WEEKLY RACING SERIES BONUS POINTS CLAIM:

HOME REGION AND/OR WEEKLY RACING SERIES HOME TRACK:

THE UNDERSIGNED AGREES TO THE FOLLOWING:

THEY WILL PURCHASE A \$100 MEMBERSHIP VALID THROUGH DECEMBER 31, 2010 AND PAY THE REQUIRED ENTRY FEE TO PARTICIPATE IN EACH NeSMITH CHEVROLET DIRT LATE MODEL SERIES SANCTIONED EVENT; TO ABIDE BY THE RULES, REGULATIONS, PROCEEDURES, AND DIRECTIONS OF SERIES OFFICIALS AT THAT EVENT; BE RESPONSIBLE TO REPORT ANY CHANGES IN THE INFORMATION REQUIRED ON THIS FORM TO SERIES OFFICIALS; AND BE HELD RESPONSIBLE FOR ANY COURT AND/OR SERVICE COSTS ACCURED IN THE COLLECTION OF ANY FEES OWED TO THE SERIES AS A RESULT OF A RETURNED OR CANCELLED CHECK.

SIGNED BY: _____ **DATE:** _____

PRINTED NAME: _____ **PHONE #:** _____

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