

RIVERSIDE SPEEDWAY
2008 CYCLONE, ANGELS & DWARF'S,
DAREDEVIL, LICENSE APPLICATION

DATE: _____ CAR # DESIRED _____ PREVIOUS # _____

YEAR / MAKE / MODEL: _____

NAME: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____

ZIP: _____

SS#: _____ DATE OF BIRTH: _____

HOME PHONE #: _____ WORK PHONE #: _____

DO YOU HAVE HEALTH INSURANCE: _____ YES _____ NO

INSURANCE CO. NAME: _____ POLICY # _____

DRIVERS LICENSE # _____ STATE: _____

EXP. DATE: _____

RACE CAR OWNERS NAME: _____

WHOM IS THE WINNINGS CHECK MADE OUT
TO? _____

FEES:

CYCLONES / ANGELS 2008 LICENSE FEE: \$55.00

NON-COMPETITOR LICENSE: OWNER, CREW MEMBER, ETC:
\$55.00 IF PURCHASED BY 4/1/08

NON-COMPETITOR LICENSE: OWNER, CREW MEMBER, ETC:
\$65.00 IF PURCHASED AFTER 4/1/08

IF NON-COMPETITOR LICENSE: CAR # _____ DIV. _____

I understand that acceptance of this permit application and fee by RIVERSIDE SPEEDWAY does not constitute approval of the permit application, and that all permit applications must be approved by the management of RIVERSIDE SPEEDWAY. RIVERSIDE SPEEDWAY reserves the right to refuse any application for driver or non-competitors permit at any time.

Permits expire 12/31/08.

IF APPLICANT HAS NOT REACHED AGE 18, A MINORS
RELEASE FORM MUST BE FILLED

OUT AND RETURNED TO SPEEDWAY WITH A CERTIFIED
COPY OF PROOF OF AGE

DOCUMENT!!!!

APPLICANT'S

SIGNATURE: _____ DATE: _____

APPLICATION MUST BE FILLED OUT IN FULL, AND SIGNED ON BOTH SIDES, AND PERMIT FEE ENCLOSED, TO BE ACCEPTED FOR PROCESSING!

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Permits expire 12/31/08.

IF APPLICANT HAS NOT REACHED AGE 21, A MINORS RELEASE FORM MUST BE FILLED OUT AND RETURNED TO SPEEDWAY WITH A CERTIFIED COPY OF PROOF OF AGE DOCUMENT!!!!

Youth Racing is for youngsters between the ages of 10-14. Anyone turning 15 during the racing season, after July 31, 2008 will be able to complete the racing season in the Youth Racing.

Anyone that turns 15 before July 31st will have to move up to the regular Cyclone, (4 cylinder Enduro) or into a regular racing division AT THE DISCRETION OF TRACK MANAGEMENT.

APPLICANT'S

SIGNATURE: _____ DATE: _____

PARENT OR LEGAL GUARDIAN

SIGNATURE: _____ DATE: _____

APPLICATION MUST BE FILLED OUT IN FULL, AND SIGNED ON BOTH SIDES, AND PERMIT FEE ENCLOSED, TO BE ACCEPTED FOR PROCESSING!

**Dick Therrien
P.O. box 187
Lyndon, VT 05849
Thanks
Dick Therrien**