



Home Of The Dealers Choice

This must be completed before you participate and receive prize check.

Driver Registration

Full Name: _____
Last (please print clearly) First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: () _____ Alternate Phone: () _____

E-mail Address: _____

Social Security or Federal ID Number: _____

Birth Date: _____ Owner Name: _____

Owner Address: _____

Owner Phone: _____ Check Payable To : _____
This is whom the 1099 will be sent to when racing ends.

Emergency Contact Information

Full Name: _____
(print clearly)

Primary Phone: () _____ Cell Phone: () _____

Relationship: _____

Car Information

Division: _____ Car #: _____

Car Color(s): _____ Sponsors: _____

Began racing: _____

Rookie Yr: _____

I have received, understand and will abide by the Hartford Motor Speedway Pit &Track Rules at all times.
Failure to comply could result in disqualification from the facility indefinitely.

Drivers Signature: _____ Date: _____

Owners Signature: _____ Date: _____

Registration Fee paid: _____