



P. O. BOX 344, ROWLEY, MA 01969

OFFICE NO. 978-462-4252

**2018 REGISTRATION FORM FOR THE  
SIX (6) CYLINDER IRONMAN DIVISION:**

**FEE: \$50.00**

**PAYOFF INFORMATION:**

Information must be completed for payoff check.

Legal Name on check: \_\_\_\_\_ SS #/Tax I.D. # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**OWNERS INFORMATION: PLEASE PRINT:**

Owner's Name: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell #: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

S.S.#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ D.O.B.: \_\_\_\_\_ NASCAR Lic. # \_\_\_\_\_

Occupation \_\_\_\_\_ Chief Mechanic \_\_\_\_\_

**DRIVER'S INFORMATION: (PLEASE PRINT) CHECK BOX IF A ROOKIE IN THIS DIVISION:**

Driver's Name: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell #: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

S.S. #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ NASCAR Lic. #: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Occupation \_\_\_\_\_ Major Sponsor: \_\_\_\_\_

**CAR INFORMATION: IRONMAN Transponder No: \_\_\_\_\_**

Year: \_\_\_\_\_ Make & Model: \_\_\_\_\_ Car #: \_\_\_\_\_

DRIVER AND OWNER PARTICIPATION IS REQUIRED IN THE ANNUAL LEE USA SPEEDWAY BANQUET OF CHAMPIONS 11/17/18. THE TOP 10 TEAMS IN EACH DIVISION ARE REQUIRED TO ATTEND, FAILURE TO ATTEND THE BANQUET WILL RESULT IN THE LOSS OF ALL LEE & NASCAR POINT FUND MONEY AND AWARDS, PLUS ANY SPECIAL SERIES AWARDS. A CURRENT NASCAR LICENSE IS REQUIRED FOR ANY DRIVER AND OWNER TO RECEIVE LEE & NASCAR POINT FUND MONEY. THE UNDERSIGNED DRIVER AND CAR OWNER AGREE TO ATTEND THE ANNUAL LEE USA SPEEDWAY BANQUET OF CHAMPIONS. NO ONE ELSE CAN PICK UP YOUR TROPHY AND AWARDS AT THE BANQUET.

Driver's Signature \_\_\_\_\_ Date \_\_\_\_\_

Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE ONLY: Amount Paid: \_\_\_\_\_ Check #: \_\_\_\_\_**

Date Paid: \_\_\_\_\_ Received by: \_\_\_\_\_ Approved: \_\_\_\_\_