



# 2020 MEMBERSHIP APPLICATION

NAME: \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
 STREET: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE/PROV.: \_\_\_\_\_ ZIP/POSTAL CODE: \_\_\_\_\_  
 HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ SRA Forum ID: \_\_\_\_\_

Memberships expire December 31, 2020

MEMBERSHIP TYPE REQUESTED:		
<b>RACING</b>	<b>WEEKEND RACING</b>	<b>NON-RACING</b>
<b>\$80.00</b>	<b>\$ 30.00</b>	<b>\$40.00</b>

### **RACING MEMBERS ONLY: PLEASE COMPLETE THE FOLLOWING**

I am a: Driver \_\_\_\_\_ Passenger: \_\_\_\_\_ Plate Number requested: \_\_\_\_\_ Competition Class: \_\_\_\_\_  
 Chassis: \_\_\_\_\_ Motor: \_\_\_\_\_ RACE Lic: \_\_\_\_\_

### **EMERGENCY CONTACT:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

- I hereby give the Sidecar Racers Association (SRA) permission to release my information to SRA members.
- I hereby agree to abide by all the rules and regulations of the SRA.
- I acknowledge that the SRA is a volunteer group that is responsible for the non-race activities for the club. The SRA is not responsible for race related activities nor the safety of myself nor my equipment at scheduled events. All liability is held by the racetracks that I attend and the sanctioning bodies that host the racers, and not the SRA

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Payment options; cheque payable to Michael Vinten SRA or e-mail transfer to: m.vinten@sympatico.ca

Membership Form; fill on computer OR print & scan, then e-mail to m.vinten@sympatico.ca or mail to:

SIDECAR RACERS ASSOCIATION  
 c/o Michael Vinten  
 49 Trillium Crescent  
 Russell, ON K4R 1B1

Received \_\_\_\_\_ Membership# \_\_\_\_\_ Fee Paid \_\_\_\_\_