

Driver Information and Registration

Race Class _____

Driver Name _____ Car # _____

Address _____

City _____ State _____ Zip _____

Social Sec. # _____ Phone # _____

E-Mail Address _____ Registration Paid _____

Payee if different then Driver

Name _____

Address _____

City _____ State _____ Zip _____

Social Sec. # _____ Phone # _____

Mail with \$20.00 to:
Thomas County Speedway
1295 E. 8th Street
Colby, KS 67701