

Central New York Ice Racing Association
Event Registration Form

Car # Class

PLEASE PRINT CLEARLY OR FILL OUT ON A COMPUTER AND PRINT IT

Name: _____ Car Make: _____ Year: _____

Address _____ Model: _____

City, State Zip _____ Color: _____

Phone #: _____ Email: _____

In Case of Emergency notify: _____ Phone # _____

Relationship _____ Are they at this event: _____

Membership: (IF you are not a current member please obtain and fill out a membership form and pay annual fee) \$30 _____

Select and pay one of the following race fees
Class event fee \$40 + Plowing \$10 \$50.00 _____ 1st time racing on the ice (1/2 fee, full plow) \$30 _____
Open event fee \$20 + Plowing \$10 \$30.00 _____ \$20 _____
Class fee \$40 + Open fee \$20 + Plowing \$10 \$70.00 _____ \$40 _____
Make checks payable to CNYIRA

Please review the Rules and volunteer to help with the event, please check one below.

Registration ____, Timing & Scoring ____, Corner work ____, Starter ____, Misc. ____
====Do not write below this line=====Do not write below this line=====

--Registration:--

Date: _____ Location _____

(check off) Fee paid: Membership: __ Class: __ Open: __

Waver signed: __ Drivers license check __

Tech Inspection: (Pass/Fail/Warning) Comments on back

Tires: ____	Brake light ____	Fire Extinguisher: ____
Mirror: ____	Fuel Tank: ____	Numbers and class ____
Helmet: ____	Windshield: ____	Fog Lamp or running lights: ____
Seat Belt: ____	Spill Pillow: ____	Car cleaned out, no loose items: ____
Bumpers: ____	Verify Class: ____	Tech Inspector initial: ____
Roll cage: ____	Battery Secure: ____	If needed Chief/Steward override:

Event Problems or violation: