

Registration Form
Central New York Ice Racing Association

Car # (Circle): A B C D E
2WD 4WD
Class Open Both

PLEASE PRINT CLEARLY

-or- fill out on a computer and print it

*Name: _____ Car Make: _____ Year: _____

*Address _____ Model: _____

*City, State Zip _____ Color: _____

*Phone #: _____ E-mail: _____

*In Case of Emergency notify: _____ *Phone # _____

*Relationship _____ *Are they at this event: _____

* This information is required for your safety and must be on this form!

Membership: If you are not a current member please obtain and fill out a membership form Reg \$30 _____
Fam \$35 _____

Enduro If this car is to be driven in the Enduro List co-drivers on the back of form \$20 _____
Everyone must be a member

Race fees: Select and Pay one of the Following
Class event (Primary driver) \$50
Open event (second driver) \$30 _____
Class and open (same Driver) \$80

**** Please review the Rules Make checks payable to CNYIRA Total _____

**** Volunteer to help

=====Do not write below this line=====

Registration:

Date: _____ Location _____

Membership: ___ Waver signed: ___ Drivers license check ___

Tech Inspection: (Pass/Fail/Warning-or-N/a) 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: ___ Tow Hook: ___ Tech Inspector initials: _____
Roll cage: ___ Battery Secure: ___ If needed Chief/Steward override: _____

Event problems or violation: