

GRAND BEND INTERNATIONAL  
 SPEEDWAY  
 & JCAR RACING  
 70114 -D Grand Bend Line,  
 Parkhill, ON, N0M 2K0  
 Phone # 519 - 878-6052  
[www.GrandBendSpeedway.com](http://www.GrandBendSpeedway.com)

## “2018“REGISTRATION FORM

Chq. # \_\_\_\_\_ Cash : .....

**VEHICLE INFORMATION :**

( “B” / ”A” / JLM / J.M.T. / M.T. )

Bone Stock 4 CLY : \$125.00 9hp Mods \$125.00 full season \$250.00 Half season -- \$125.00

DIVISON: \_\_\_\_\_ ENGINE: \_\_\_\_\_ REGISTRATION # : \_\_\_\_\_  
 PREFERRED #: \_\_\_\_\_ ROOKIE: YES \_\_\_\_\_ NO \_\_\_\_\_ ( MUST BE FILLED IN FOR ROOKIE STATUS)  
**DRIVER'S NAME:** \_\_\_\_\_ **CO- DRIVER:** \_\_\_\_\_  
**ADDRESS:(street)** \_\_\_\_\_ **TOWN / CITY:** \_\_\_\_\_  
**POSTAL/ZIP:** \_\_\_\_\_  
**D.O.B:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **HEALTHCARD #:** \_\_\_\_\_  
 (\*\* COPY OF BIRTH CERT. & HEALTH CARD# MANDATORY\*\*)  
**PHONE(RES):** \_\_\_\_\_ **BUS:** \_\_\_\_\_ **FAX:** \_\_\_\_\_  
**CELL#:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_  
**IN CASE OF EMERGENCY -PLEASE CONTACT: NAME:** \_\_\_\_\_  
**PHONE:** \_\_\_\_\_ **RELATIONSHIP:** \_\_\_\_\_  
**ANY KNOWN MEDICAL CONDITIONS OR ALLERGIES:** \_\_\_\_\_

**CREW:(NAME & PHONE#) \*\* MANDATORY\*\***

1) \_\_\_\_\_ 2) \_\_\_\_\_  
 3) \_\_\_\_\_ 4) \_\_\_\_\_  
 5) \_\_\_\_\_ 6) \_\_\_\_\_

DISCLAIMER: AS A MEMBER OF THE JUNIOR CANADIAN AUTO RACING SERIES I / WE AGREE TO ABIDE BY THE RULES AND REGULATIONS IN THE JCAR RULE BOOK.IT IS UNDERSTOOD THAT THIS SPORT CAN BE DANGEROUS AND THAT IT IS A, USE AT  
 YOUR OWN RISK. I / WE ARE RESPONSIBLE FOR OUR OWN ACTIONS AND FOR THE ACTIONS OF ALL OF YOUR CREW MEMBERS.THEREFORE I / WE AGREE NOT TO HOLD JCAR, JCAR MANUFACTURING ANY FAMILY MEMBERS, STAFF, SPONSORS AND OR ANY OTHER ASSOCIATIONS OR PARTNERSHIPS THAT INCLUDES ALL RACE FACILITY'S RESPONSIBLE FOR ANY EVENT'S THAT OCCUR ON OR OFF THE RACE TRACK.

\*\*\*\* I/WE HAVE READ THE ABOVE DISCLAIMER, RULES AND REGULATIONS AND I / WE ARE IN AGREEMENT WITH THE TERMS AND CONDITIONS.\*\*\*\*

**DRIVERS:** \_\_\_\_\_ **DRIVERS:** \_\_\_\_\_  
**NAME:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
 ( IF THE DRIVER IS UNDER 18 YRS. OF AGE A SIGNATURE FROM A LEGAL GUARDIAN IS REQUIRED)  
 \*\*\* PARENT OR GUARDIAN ( MUST HAVE BOTH PARENTS SIGNATURES,( IE: DIVORCED OR SEPARATED) BEFORE DRIVER CAN RACE.

**FATHER'S SIGNATURE:** \_\_\_\_\_ **MOTHER'S SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_