2017 Membership		Competition Insurance			PLEASE TYPE OR PRINT		
Date Date of	f Birth, MoDay _	Yr	Soc Sec	c/Fed ID No			
Name in full							
Last		First			Middle		
Mailing Address Number and Street		City and State			Zip Code		
				Mobile/Pager	ger		
Area Code and Number		Area Code and Number			Area Code and Number		
Insurance Beneficiary		70.11		Phone Area Code and Number			
	Last	First	Middle	F	Area Code and Numb	er	
Mailing Address of Benef	-						
N. 66		Number and Street		ate	Zip Code		
Name of Spouse		Email Address					
Children's Names and Ag	ges						
Preferred hometown to be	e listed for publicity p	urposes _					
		at: Fax No.			State		
Weinbers of the News Wie	odia may can at				Area Code and Number		
CAR F	ENTRANT ONLY P	RIZE M	ONEY AUTH	ORIZATION FO	ORM		
TQ Midget Car Number Previo	ous Year C	hoice for C	Current Year (1)	(2)Nu	mber Assigned _		
Engine make	Please m	ake all c	hecks for the p	orize money for	this car payal	ble to:	
(A)			Soc.	Sec. No			
OR							
(B)CorporateFed. Tax. No							
and mail to this address							
· · · · · · · · · · · · · · · · · · ·	SECTION MUST	ГВЕ С	OMPLETE :	BY CAR OW	NER		
			Check Appropriate Box:				
OFFICE USE ONLY			TO 16	1	-	<b>#105.00</b>	
Paid			TQ Mid	lget Owner/Drive	r ()	\$185.00	
Date			TQ Mid	lget Driver	()	\$135.00	
Member Pkt			TQ Mid	lget Car Entrant (	Owner) ( )	\$135.00	
			TQ Mid	lget Member	( )	\$75.00	
Approved by NMRA Director				Date			
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