



## Tri State Kart Club age waiver application

### Member info

Master member name \_\_\_\_\_ Member # \_\_\_\_\_  
Address \_\_\_\_\_ state \_\_\_\_\_ Zip code \_\_\_\_\_  
Phone # \_\_\_\_\_

### Childs info

Childs name \_\_\_\_\_  
Childs D.O.B \_\_\_\_\_ Age \_\_\_\_\_  
Current Class \_\_\_\_\_ Class for waiver \_\_\_\_\_  
How long in current class \_\_\_\_\_

Signature of Parent Guardian \_\_\_\_\_

### Requirements for Waiver

- 1 must be within 1 year of eligibility for the class
- 2 Must have at least one year in previous class
- 3 must have recommendation and signature from the race director
- 4 This waiver will have a 3 race probationary period minimum
- 5 Must submit a copy birth certificate with form.

Signature of race director \_\_\_\_\_

6 Submit to TSKC President.