

2017 SODCA

Application for Membership

Legal Name (Last, First, MI) _____
Address _____
City _____ State _____ Zip _____
Home phone () _____ Cell Phone () _____
Email _____ SSN# _____
Date of Birth _____ Signature _____

By signing you give the right for SODCA to use you name, car number, the use of any photos, and agree to post club sponsors on your car on a weekly bases for promotional use.

This information is needed for payout and will be put in a secure filing cabinet.

Emergency contacted

Name _____ Phone # _____

Name _____ Phone# _____

Driver Information (for the website and promoting the club)

Driver's Name _____

Driver's Nickname _____

Car Owner _____

Accomplishments _____

Years Driving a Dwarf car _____

Car Information

Car# _____ Year Chassis was made _____ Engine Make/Model (ex.

07 Suzuki GSXR 1000) _____

Make Checks Payable to SODCA (SODCA use only)

Membership Fees

Car/Driver **\$75.00** Total enclosed \$ _____

Cash/check# _____ Date Received _____