



www.pointpeleekarting.com

2010 Driver Membership application (please print clearly)

Driver Name: _____

Birth Date: _____

Parent or guardian names: _____

Address: _____

City: _____ Province/State: _____ Postal/zip code: _____

Country: _____

Res. Phone#: _____ Cell/bus phone#: _____

Email address: _____

Class entered #1: _____ #2: _____

1 kart no: 1st choice _____ 2nd: _____ 3rd: _____

2 kart no: 1st choice _____ 2nd: _____ 3rd: _____

Emergency Contact: _____ Emergency Contact Phone# _____

I/we agree to respect and abide by the constitution and by-laws for the Point Pelee Karting Club. The signatures of all the names listed above must appear immediately below.

Agreement: If accepted as a member by the Point Pelee Karting Club I (including my immediate family, father, mother, son, daughter, sister, brother, etc, crew and friends agree to abide by all the rules of the organization. Also consideration of your accepting this application, I hereby for myself, my heirs, executors, and administrators, release and forever discharge the Point Pelee Karting club and Point Pelee Karting or persons with karting promotions, of any injuries during my participation

Signature of Driver member: _____

(Note: If your under 18 years of age, Point Pelee Karting Club requires a signature of a parent or guardian)

Signature of Parent or Guardian: _____

Dated: _____

Please Note: membership application is void if the PPKC waiver is not signed or completed

Please note: this form is only an application, membership privileges are not guaranteed. Point Pelee Karting Club reserves the right to terminate or refuse any membership and/or refuse any application.

Office use

Membership approved: _____ Mem # _____ Medical on file: _____ Total fees: _____