



**GRAND BEND INTERNATIONAL  
SPEEDWAY  
& JCAR RACING**  
70114-D Grand Bend Line,  
Parkhill, ON, N0M 2K0  
Phone # 519-238-5197,  
Paul Spriet, Office : 519-672-4630  
pspriet@sprietinvestments.com  
[www.GrandBendSpeedway.com](http://www.GrandBendSpeedway.com)  
[www.JCARracing.ca](http://www.JCARracing.ca)



## “2012“REGISTRATION FORM

office use only:	Chq. # _____
GBS-:	Cash: _____
\$200.00	As of April 15 / 12 \$225.00

### VEHICLE INFORMATION:

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: \_\_\_\_\_ DATE: \_\_\_\_\_  
 NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

( 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: \_\_\_\_\_



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**DRIVERS PROFILE**

DRIVER NAME: \_\_\_\_\_ CAR # \_\_\_\_\_ DIVISION: \_\_\_\_\_

Dirt Track: Asphalt Track:

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ PHONE # \_\_\_\_\_

AGE: \_\_\_\_\_ HOME TRACK: \_\_\_\_\_ YEARS DRIVING: \_\_\_\_\_

(if under 18 yrs)

FATHERS NAME: \_\_\_\_\_

MOTHERS NAME: \_\_\_\_\_

\*\*MANDATORY UNLESS DIVORCED OR SEPERATED

**SPONSOR INFORMATION:**

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**FAVOURITE RACETRACK:**

**CAREER HIGHLIGHTS:**

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