



20__ Car/Driver Pre-Registration Form

Fee: Car & Driver \$30, Non-Refundable

Driver Details

Race date registering for: Month_____ / Day_____ / Year_____

1. Car Number Registration: _____
2. Car Class: _____
3. Driver's Name: _____ Age: _____
4. Home Phone/Cell phone: _____ / _____
5. Mailing Address: _____
6. City: _____ State: _____ Zip: _____
7. Email Address: _____

Car Details

8. Car Owner's Name: _____
9. Car Make Model/Chassis: _____
10. Engine: _____
11. Built By: _____
12. Sponsors in the order of importance: _____

Emergency Information

13. Contact: _____ Phone: _____
14. Driver's Signature: _____

This Area For ETRA Use Only

- A. Registration Fee for 20__, \$ _____
- B. Date Paid: ___/___/___ Paid By: Cash _____ Check/Check No. _____
- C. ETRA Signature of Receipt: _____

Mailing address/payable to: Republic Eagle Track Raceway • PO Box 494 • Republic, WA 99166
Must stop by pit gate entrance to sign in and receive your wristband for the day.