



**2010 Membership Form**

All questions marked \* must be answered

\*Name: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_

\*Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

\*Driver ( ) Yes ( ) No \*Minor ( ) Yes ( ) No D.O.B. \_\_\_\_\_

\*Is this the first time racing at TKC? ( ) Yes ( ) No

COPY OF BIRTH CERTIFICATE MUST BE ON FILE WITH TKC

\*Parent/Legal Guardian Name: \_\_\_\_\_

\*Occupation: \_\_\_\_\_

\*Kart Classification/Division: \_\_\_\_\_ \*Kart Number: \_\_\_\_\_

\*Who to contact in case of emergency: \_\_\_\_\_

\*Phone number of emergency contact: \_\_\_\_\_

\*Do you have any health conditions that the paramedics should be aware of? ( ) Yes ( ) No

\*If yes, please explain: \_\_\_\_\_

I/We hereby give permission for the staff of Tucson Kart Club to provide treatment and/or arrange transportation if necessary in case of on-site emergency or life threatening situation for either myself or my child. I understand karting involves risk and hereby release Tucson Kart Club, its members and successors, and assigns from any liability arising from participation.

\* member must sign here: \_\_\_\_\_

Legal signature of adult or parent/legal guardian of minor

\_\_\_\_\_ I DO NOT wish my address and phone number to be published in the club directory.

Date of application \_\_\_\_\_ Total amount paid \_\_\_\_\_ ( ) cash ( ) check # \_\_\_\_\_

Regular Membership Fee: \$50, each additional family member is \$40.

Tucson Kart Club  
7951 S Wild Primrose Ave  
Tucson, AZ 85747