

| Phone # 508-999-1480 | 374 Myrtle Street New Bedford, MA 02746 Fax # 508-990-1487 www.seniortourautoracers.com | e-mail starracing@netzero.com |
|------------------------------------|--|-------------------------------|
| APPLICATION F | FOR MEMBERSHIP YEAR 201 | 18 DUES: \$25.00 |
| CARD # Please Print | RENEWAL | NEW |
| Name | S | pouse |
| Street | | |
| City | State | Zip |
| Telephone# | Fax# | E-Mail |
| Telephone # Used If You Want to | o Receive Instance Updates/Cancell | ations |
| Your Home Track: | | |
| If car owner please give brief his | story: | |
| Year Make_ | Model | Car# |

Brief History of Car____ Original Driver

Sole purpose of Senior Tour Auto Racers is to preserve the History of Auto Racing and to honor the people who made it what it is today. Signing this application I agree to abide by the rules and regulations set by Senior Tour Auto Racers Inc. I further certify that I am an independent contractor and not an agent, servant or employee of Senior Tour Auto Racers Inc. and that I will retain, such status as an independent contractor in the event my membership application is approved. I the undersigned hereby release, waive discharges and covenants not to sue the Senior Tour Auto Racers Inc, Board of Directors, Officers, Members or Sponsors.

I hereby assume full responsibility for any risk of bodily injury, death or property damage due to the negligence of the above named releases for myself, my heirs, next of kin and all others who have claim to my estate. I further agree to release Senior Tour Auto Racing Inc. of any liability for injuries or death that may occur in an event that is sanctioned by Senior Tour Auto Racing Inc. I also, am aware that my membership can be suspended for violations of any and all rules set forth by Senior Tour Auto Racing Inc. I am aware that my membership is non transferable and I am over the age of 18 and do hold a valid driver's license. Date

I have read and voluntarily sign this application on

Signature

Date of Birth