2023

Sharon Speedway Registration



FOR OFFICE USE ONLY DIVISION	8
CAR NO	8
FEES PAID	8
INITIALS	8

FREE Pre-Registration through	gh April 15, 2023	
DRIVER INFORMATION		
CAR #:	DIVISION:	
Full Name (as appears on Socia	al Security Card):	
How would you like your first na	me to be announced & appear in pre	ss releases?
Transponder # (AMB/MyLaps or	nly):	
Address:		
City:	State	Zip Code
Social Security Number:	E-mail addres	ss:
Driver's License Number:	State:	Birth Date:
Home Phone:	Work Phone:	
Cell Phone:	Spouse's Name:	
In Case of Emergency, Notify: _		
Relationship:	Phone #:	
accidental injuries which are a result of ex Sharon Speedway for such injuries occurring COMPLIANCE: The undersigned agrees acknowledges having read, understood and regulations of Sharon Speedway now pure undersigned recognizes his/her acceptance revoked at any time when this agreement	ternal, violent and visible means sustained in Sping to me in any Speedway event provided proper reto abide by all rules and regulations of the Spid voluntarily understands this agreement and the ablished and hereinafter modified. In considerate to all Sharon Speedway official's decisions, perhas been breached. The undersigned understar	of the Competitor Accident Policy procured by the Speedway for eedway events. The forgoing shall constitute the limit of liability of notification is given to the speedway by me. eedway now published or hereinafter modified. The undersignerules of the Speedway and agrees to abide by the current rules and tion of the acceptance by the Speedway of this agreement, the nalties and suspensions with the possibility of the registration being that car racing can be a dangerous sport and the pit area is see Sharon Speedway from all liability resulting from any injury.
	vents, and relinquishes any right to photos or foota	or video of himself/herself and their car for publicity, advertising an age taken in connection with events and consents to the publication
	arising out of or relating to this agreement, includi he undersigned agrees to accept the decision reno	ing any alleged breach, shall be settled in accordance with the rule dered by this process.
FRONT AND BACK MUST BE	COMPLETED IN ORDER TO RECEIVE	E ANY PAYMENT FROM SHARON SPEEDWAY.
	NDERSTAND THIS AGREEMENT. I	AGREE TO ABIDE BY ALL TERMS OF THIS RTH BY SHARON SPEEDWAY.
IF YOU V	WOULD LIKE RULES SENT TO YOU	J PLEASE CHECK BOX □
DRIVER'S SIGNATURE		DATE

OWNER INFORMATION

ess:								
					State:		Zip Code	e:
Sec. or E	EIN Numbe	er:		E	mail Address:			
e Phone:	:			(Other Phone: _			
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13013								
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Form	VV -9 October 2007)				est for Taxpayer Number and Certification			Give form to the requester. Do not
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Internal	Name (as show	vn on your income t	ax return)					- Marie - 10
2.	, ,	8	in.					
bade	Business name	e, if different from ab	oove					
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or type ructions	Check appropriate box: Individual/Sole proprietor Corporation Partnership Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership)						Exempt payee	
t or	Table 1	nstructions) ►	Construction (Marcon Construction)		3833 33	1		The second secon
Print or type Specific Instructions	Address (num)	Address (number, street, and apt. or suite no.) Requester's name and ad						address (optional)
ecifi	City, state, and	d ZIP code						
æ Sp	List secount s	umbaria) bara (anti-a	R			ą.		
Se	List account n	umber(s) here (option	nai)					
Par	Taxp	ayer Identifica	ation Number	(TIN)				
Enter	your TIN in the	appropriate box	The TIN provided	must match the	name given on Line	1 to avoid	Social sec	urity number
backu	p withholding.	For individuals, th	nis is your social se	ecurity number (§	SSN). However, for a	resident	d.	
alien, sole proprietor, or disregarded entity, see the Part I instruct your employer identification number (EIN). If you do not have a nu							30	or
	Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.					Employer i	dentification number	
Part	TO A TO A POSSIBLE OF THE PARTY	fication						1
The state of the s		erjury, I certify tha	at:					
1. Th	ne number show	wn on this form is	my correct taxpa	yer identification	number (or I am wa	iting for a nun	nber to be i	ssued to me), and
			ubject to backup w	vithholding as a r				notified by the Internal ends, or (c) the IRS has
Re		am no longer sul	bject to backup w					
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3. I a Certif withho For m arrang	otified me that am a U.S. citize ication instruc- biding because ortgage interes gement (IRA), a le your correct	en or other U.S. per tions. You must of you have failed to to paid, acquisition and generally, payr TIN. See the instr	erson (defined belo cross out item 2 al o report all interest n or abandonment	ow). bove if you have t and dividends o of secured proporterest and divide	on your tax return. Ferty, cancellation of	or real estate debt, contribu	transaction itions to an	s, item 2 does not apply. individual retirement