2023 Local's Cup Registration

CAR #:	DIVISION:	UMP MOI	DIFIEDS	
Full Name:				
				_ Zip Code
Driver's License Number:		State:	Birth Date: _	
BENEFITS: I agree that mys the Speedway for accidental forgoing shall constitute the notification is given to the speedway for accidental forgoing shall constitute the notification is given to the speedway for accidental forgoing shall constitute the notification is given to the speedway for account of the undersigned acknowledge and agrees to abide by the content of the acceptance by the Speedway for accidental for acceptance by the Speedway for accidental for accident	endent contractor assuming all workers compensation and with workers compensation and with self, Executors and assigns will injuries which are a result of elimit of liability of Raceway 7 for eedway by me. Igned agrees to abide by all rules ges having read, understood an current rules and regulations of edway of this agreement, the pensions with the possibility of the understands that car racing consibility for injury to themselved. The undersigned consents to the publication or satisfactors.	be entitled only to external, violent are such injuries or such injuries or and regulations of voluntarily under Raceway 7 now pundersigned recorder egistration being and releases Rube use of his/her rafter the events, alle of such photos	money received as m not an employee, benefits of the Comp not visible means suscurring to me in any of the Speedway now erstands this agreemoublished and herein gnizes his/her acceing revoked at any time ous sport and the paceway 7 from all liamame, pictures or vicand relinquishes any as the Speedway so	deo of himself/herself and their car right to photos or footage taken in desires.
ARBITRATION: Any controv accordance with the rules an	versy or claim arising out of or red d regulations of Raceway 7 and	elating to this agre I the undersigned a	ement, including any agrees to accept the	alleged breach, shall be settled in decision rendered by this process.
DRIVER'S SIGNATI	URE			
	<u>OWNE</u>	R INFORMATI	<u>ION</u>	
Car Owner's full name o	r Business name:			

2023 Local's Cup Registration

:		State:		Z	ip			
IS SECT		E COMPLETED BEFORE ANY MONIES WILL SERESPONSIBILITY OF THE: Driver		RELEAS Owne				
Departr	W-9 October 2007) ment of the Treasury Revenue Service	Request for Taxpayer Identification Number and Certification			Give form to the requester. Do no send to the IRS.			
2,	Name (as shown on yo	our income tax return)			19960			
Print or type Specific Instructions on page	Business name, if different from above							
	Check appropriate box: ☐ Individual/Sole proprietor ☐ Corporation ☐ Partnership ☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ ☐ Exempt payee ☐ Other (see instructions) ▶ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐							
	Address (number, street, and apt. or suite no.) Requester's name and address (optional)							
Specific	City, state, and ZIP code							
See	List account number(s) here (optional)							
Par	t I Taxpayer I	dentification Number (TIN)						
-	manufación de la company de la							
backı	your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid up withholding. For individuals, this is your social security number (SSN). However, for a resident			Social security number				
		regarded entity, see the Part I instructions on page 3. For other entiti number (EIN). If you do not have a number, see How to get a TIN or		or				
Note.	Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.		Employer identification number					
Par	t Certification	on						
Unde	r penalties of perjury, I	certify that:						
1. T	he number shown on t	his form is my correct taxpayer identification number (or I am waiting	for a num	nber to be is:	sued to me), and			
R	evenue Service (IRS) th	kup withholding because: (a) I am exempt from backup withholding, on hat I am subject to backup withholding as a result of a failure to repo- longer subject to backup withholding, and						
3. 1	am a U.S. citizen or other U.S. person (defined below).							
withh For m arrang	olding because you ha nortgage interest paid, gement (IRA), and gene	You must cross out item 2 above if you have been notified by the IR: we falled to report all interest and dividends on your tax return. For reacquisition or abandonment of secured property, cancellation of deberally, payments other than interest and dividends, you are not required the instructions on page 4.	eal estate	transactions, tions to an ir	item 2 does not apply adividual retirement			
Sign		19	ate ►					

2023 Local's Cup Registration

Registration Fee - \$100.00

Make Checks Payable to: Raceway 7

11425 Neiger rd Girard, PA 16417