

High Plains Late Model Series 2024 Driver Registration

Driver Name: _____

Driver Address: _____

Driver Phone: _____

Driver Email: _____

Car Number: _____

Competing for Rookie of the Year : Yes No Circle One

Sponsors/Marketing Partners _____

Transponder S/N: _____

Car Owner (if different from driver): _____

Car Owner Address: _____

Car Owner Phone: _____

Car Owner Email: _____

Make Checks Payable to: _____

Person or Business Responsible for Taxes SS# or EIN _____

Motor Manufacturer and Size: _____

(HPLMS USE ONLY) Restrictor Size: _____

Motor Builder: _____

Crew: _____

\$100.00 CHECK _____ CASH _____ DATE _____

By Signing you agree to have read and understand all and any rules and regulations of High Plains Late Model Series. You also agree to abide by all rules and regulations and hold any and all Owners, Agents, Representatives, Officials, Promoters, Officers, and/or Partners harmless from any penalties for any violation of the rules and regulations. You also Agree to hold any and all Owners, Agents, Representatives, Officials, Promoters, Officers, and/or Partners harmless from any loss, damage, personal injury or death due to competing in competition at any and all events promoted and sanctioned by High Plains Late Model Series.

Printed Name _____

Signed _____

Date _____