trackmasters
A DRIVING INFLUENCE SINCE 1990

Application Checkout for Open Track

CHECKOUT CANDIDATE ~~ PERSONAL INFORMATION

Name:			
Address:			
City:	State/Province:	Country:	Zip:
Home Phone: ( )	Work Phone: ( )		
Cell: ( )	Email/Other:		
Birth Date: / /	Driver's License #:		State Issued By:

VEHICLE INFORMATION ~~ Required for ALL Open Track Checkout Candidates

******Is this Vehicle a Convertible or Roadster?******	*If YES:* ***STOP!***	**NO:**

Due to safety issues regarding our Instructor in your passenger seat, we no longer allow the use of Convertibles and Roadsters during our Checkout procedure. Exceptions require the express permission of our Chief Instructor

Does your vehicle have a passenger seat? *Required for Checkouts*	*If NO:* ***STOP!***	**YES:**

If your vehicle does not have a passenger seat, you will need the express permission of our Chief Instructor to take your check ride. Once you have passed our Checkout procedure to enter Open Track, you will be allowed to drive single-seat vehicles.

Year & Make		
Model & Color(s)		
Are there equal restraints for the Driver & Passenger? *Required for Checkout*	**YES:**	NO:
Is this vehicle muffled? *Preferred, to meet the tracks' Sound Level requirements*	**YES:**	NO:
Is this vehicle prepared for Race Competition?	YES:	NO:
Does this vehicle have a permanently affixed Competition Number?	YES… #	NO:
I will be sharing this vehicle in Open Track with:		

CHECKOUT for OPEN TRACK ~~ Required Driving Reference

Participants in this category are Advanced/Instructor/Competition level drivers who have ***extensive*** experience with other organizations prior to applying with *trackmasters*. All Candidates must supply **ONE DRIVING REFERENCE** from an organization they are currently affiliated with.

Reference Name for Open Track Candidate: _____ Organization: _____

EMAIL or Address: _____ Telephone: ( ) _____

CHECKOUT CANDIDATE DRIVING EXPERIENCE ~~ Please be Precise, or Attach a Formal Résumé

Names of Organizations that You've Driven With	The Race Track Where You Drove	Years Participated From To	Total # of Days Driven	*Do You Instruct?*
		/		
		/		
		/		
		/		
		/		
		/		

_____ _____ _____

PRINTED Name *Signature* *Date*