

SASKATCHEWAN DRAG RACING ASSOC. INC.

Box 7859, Saskatoon, Sask. S7K 4R5

Ph: (306) 955-3724, www.racesir.com

SDRA – Owners/Operators of Saskatchewan International Raceway

2012 SDRA MEMBERSHIP FORM

(Expires October 31, 2012)

REGULAR MEMBERSHIP FEES - **\$50.00** (For new & renewing members)

Family Membership fees - **\$5.00 each.**

Family members who wish to earn points in any Racer Points Series must pay a Regular membership fee of **\$50.00.**



Please indicate how you would like your SDRA NEWSLETTER sent to you:

_____ regular mail; _____ e-mail

1. Please check (✓) one: New member _____ Renewing Member _____

2. Previous SDRA No. (If Applicable) _____.

3. Has your mailing or e-mail address changed from last year? _____ yes _____ no

4. NAME _____ Age _____ (D.O.B.)
(Under 18 Yrs. Only -list D.O.B) M/D/Y

ADDRESS _____

CITY _____ PROV. _____ P.C. _____
(Important-Please Include)

PHONE (HOME) _____ (WORK) _____ (Cell) _____

E-MAIL ADDRESS _____

(Please include e-mail address if possible as important information is sometimes sent out to members/racers regarding race events.)

5. EMPLOYER _____ OCCUPATION _____

6. FAMILY MEMBER'S (who wish to become SDRA members) (**\$5.00 each**):

*****(Family Members who are under 18 Years of age – MUST list D.O.B. – Month/Day/Year)*****

1) _____ 2) _____ 3) _____
4) _____ 5) _____ 6) _____

7. AT PRESENT, ARE YOU:

A Racer _____; a non-racer _____; an NHRA member _____

REQUEST FOR ADDITIONAL SDRA MEMBER DECALS (**\$2.00 EACH**):

Please send me _____ extra decal (s). (NOTE: All members receive one free decal).

PAYMENT AS FOLLOWS:

\$ _____ is enclosed for a regular SDRA members

\$ _____ is enclosed for all family memberships (**\$5.00 each**)

\$ _____ is enclosed for EXTRA SDRA decals.

Check one - if PAYING by _____ MASTERCARD OR _____ VISA

Card # _____ Expiry Date _____

FOR OFFICE USE ONLY:

DATE RECEIVED _____

RECEIVED: Cheque \$ _____ Cash \$ _____ Visa/M/C \$ _____ M.O. \$ _____

RECEIVED BY: Mail _____ at SIR _____ Other _____

MEMBERSHIP NUMBER ASSIGNED _____

FAMILY MEMBER NUMBER (S) _____