

# AKRA Associate Application

New / Renewal / Temp (Current # \_\_\_\_\_)

Master Associate Fee: \$45.00

Junior Associate Fee: \$15.00 (thru age 17)

(Junior Associate Current # \_\_\_\_\_)



Mail with check To: American Kart Racing Association, Inc.

7229 Landsford Rd  
Monroe, NC 28112  
Phone: (704)764-8138  
Fax: (704)764-9220

**2022**

## Associate Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Fax Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last 4 digits of Social Security #: \_\_\_\_\_

## Junior Associate Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Fax Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last 4 digits of Social Security #: \_\_\_\_\_

## **What type of kart racer are you? (Circle all that apply)**

2-Cycle

4-Cycle

Enduro

Pavement

Dirt

Racing Experience:

\_\_\_\_\_  
\_\_\_\_\_

(Use Back of page if more room is needed)

## Emergency Medical Information

In case of emergency contact:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Health Insurance Carrier: \_\_\_\_\_

Emergency Medical Data: \_\_\_\_\_

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Applicant Signature

All information contained in this application for membership is true and correct. Applicant understands that motor racing can result in personal injury or death. Applicant accepts these risks associated with this form of motor competition and by signing this application, agrees not to sue or hold liable the American Kart Racing Association, its owners, board members, officials, staff, sponsors, promoters, participants, or lessees.

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Signature of Applicant

Date

If Applicant is a Minor, a Minor's Release Must Be Signed and On File

*(Attached)*

***Photocopy of Minors certified birth certificate must be submitted with this application and remain on file with American Kart Racing Association.***

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Signature of parent or guardian

Date