



Driver Info

Driver Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Division: _____

1099 Recipient Info

Name: _____

Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

SS#/EIN# _____

(If name is individual you must put your social security number, if name is business name you must put your EIN#. NO EXCEPTIONS!)

I agree that all information on this form is to be true and to the best of my knowledge. I agree to abide to all of rules and guidelines of Jackson County Speedway and hereby give permission for the use of all photographs of myself/and or my car as part of any publicity, or related news or activities. By participating at Jackson County Speedway, I am agreeing with all drivers, owners, spectators and race track officials that the track and properties are in safe condition and that any damages incurred while on the properties are not the responsibility of Jackson County Speedway, management, or employees. By further signing this form, I acknowledge the track owners right to withhold any earnings until all information is furnished to support 1099 tax requirements.

Signature: _____ **Date:** _____