

SIRA

Southern Indiana Racing Association

www.sirakarting.org

2019 SIRA Membership Form
Southern Indiana Racing Association Inc.

"It All Starts Here"

Name: _____
Mailing Address: _____
City and State: _____ Zip Code: _____
Phone: (____) _____ Date of Birth: _____ Age: _____
Email Address: _____
New Member: _____ Renewal: _____ \$50.00 Membership fee Paid: _____
Preferred Kart #: _____
1st Points Class: _____
2nd Points Class: _____
3rd Points Class: _____

Points class(es) MUST be declared prior to the start of the race. Points are included in all classes with your paid Membership. Please list any additional points classes on back. Entry Fees are used to purchase awards at the end of the racing season.

SIRA and named sponsoring organizations are co-promoters.

Each Driver is expected to have health/medical insurance.

Insurance provided by WKA at events is supplemental.

I HAVE READ THE ABOVE AND AGREE TO ABIDE BY ALL RULES AND REGULATIONS SET FORTH BY THE SOUTHERN INDIANA RACING ASSOCIATION – MIDWEST CHAMPIONSHIP SERIES AND TO CONDUCT MYSELF IN A SPORTSMAN-LIKE MANNER.

Signature: _____ Date: _____

Please call 765-649-8647 if you have any questions filling out this form.

Mail to: Jessie McFall
207 E. Benton St.
Alexandria, IN 46001