



Amount Paid: _____
Paid to: _____
Cash: _____ Cheque: _____
Insurance Form Submitted: _____

2018 CMRO Membership Form

PLEASE print clearly, and fill out entire form:

Name: _____ Name to appear on Pit Pass: _____
(OR "Guest Pit Pass")

Children's Names (Under 18):

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

Address: _____ Town: _____ Prov: _____

Postal Code: _____

Phone #: _____ Email: _____

EMERGENCY CONTACT:

Name: _____ Phone #: _____

Vehicle Name: _____ Competition #: _____ Class: _____

Year: _____ Make: _____ Model: _____

By signing this form, I hereby agree to conduct myself in a safe and respectable manner, following the rules and regulations of the CMRO at all events. Photos and truck info may be used for CMRO promotional purposes.

Date: _____ Signature: _____