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APPLICATION FOR MEMBERSHIP YEAR 2025 DUES: \$25.00

CARD # _____ RENEWAL _____ NEW _____
Please Print

Name _____ Spouse _____

Street _____

City _____ State _____ Zip _____

Telephone# _____ Fax# _____ E-Mail _____

Telephone # Used If You Want to Receive Instance Updates/Cancellations _____

Your Home Track: _____

If car owner, please give brief history:

Year _____ Make _____ Model _____ Car# _____

Original Driver _____ Brief History of Car _____

Sole purpose of Senior Tour Auto Racers is to preserve the History of Auto Racing and to honor the people who made it what it is today. Signing this application, I agree to abide by the rules and regulations set by Senior Tour Auto Racers Inc. I further certify that I am an independent contractor and not an agent, servant or employee of Senior Tour Auto Racers Inc. and that I will retain, such status as an independent contractor in the event my membership application is approved. I the undersigned hereby release, waive discharges and covenants not to sue the Senior Tour Auto Racers Inc, Board of Directors, Officers, Members or Sponsors.

I hereby assume full responsibility for any risk of bodily injury, death, or property damage due to the negligence of the above-named releases for myself, my heirs, next of kin and all others who have claim to my estate. I further agree to release Senior Tour Auto Racing Inc. of any liability for injuries or death that may occur in an event that is sanctioned by Senior Tour Auto Racing Inc. I also, am aware that my membership can be suspended for violations of any and all rules set forth by Senior Tour Auto Racing Inc. I am aware that my membership is nontransferable, and I am over the age of 18 and do hold a valid driver's license.

I have read and voluntarily sign this application on _____ Date _____
Signature _____ Date of Birth _____

Emergency Contact Name _____ Phone Number _____