

ARIZONA MINI SPRINT ASSOCIATION MEMBERSHIP APPLICATION

2009

Racing Membership \$60.00

Card # _____

Driver _____

Address _____

City, State, Zip _____

Phone Number Home (____)_____ Work (____)_____

Email _____

Driver Soc. Sec. # _____ Date of Birth _____

Car # _____ Chassis Make _____ Engine _____

Remember: Owner will receive tax information if over \$600 earned thru the season

Owner Name _____ Owner Soc. Sec. # _____

Owner Address _____

City, State, Zip _____

Sponsors _____

Pit Crew _____

How many years driving mini sprints? Rookie _____ or _____ years.

Other racing experience _____

**Racing accomplishments:
(Awards, Point Championships, etc.) _____**

Please return along with the correct dues for Membership to:

**A.M.S.A
C/O Katherine Aragon
1729 E. Apollo Rd
Phoenix, AZ 85042
Make checks payable to "A.M.S.A."**