



**Please Print**  
**2022 Limited Driver Information**

Driver's Name: \_\_\_\_\_ Car Number: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Driver's Birthdate: \_\_\_\_\_ Driver's Occupation: \_\_\_\_\_

In Case of Emergency Contact Person's Name : \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Briefly list any medical conditions we should know about, in case of an emergency.  
Such as allergic to bees, diabetes, heart condition or allergies to any medications.

\_\_\_\_\_

If so, is there any special procedures necessary for treatment:

\_\_\_\_\_

Car Make /Model: \_\_\_\_\_

Body Supplier: \_\_\_\_\_ Chassis Builder: \_\_\_\_\_

Engine Type & Builder: \_\_\_\_\_

Crew Chief: \_\_\_\_\_

Sponsors: \_\_\_\_\_

\_\_\_\_\_

Accomplishments - Such as Track Championships, Rookie of the year, etc:

Years Racing: \_\_\_\_\_ Are you running for Rookie of the Year: \_\_\_\_\_

**Please Note that if you earn over \$600.00 in winnings you will receive a 1099. These will be mailed by January 31st of the following year. Who should receive the 1099?**  
**Please Note that all purses paid by check will be made out to person noted below.**

Driver: \_\_\_\_\_ Truck Owner: \_\_\_\_\_ Other: \_\_\_\_\_

Name: \_\_\_\_\_ SS Number/FID Number: \_\_\_\_\_

Address: \_\_\_\_\_

**Please sign below verifying that all information you have listed above is correct.**  
**No one under 13 years of age will be eligible to compete in the Southeast Super Truck Series.**  
**If you are 13-18 years of age, you must have appropriate parental consent forms signed by parents/guardians. See Series Administrator for forms. Must have qualified references to be eligible to participate.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_