

County Line Raceway

PO Box 187
Elm City, NC 27822

(252)985-1949-Track (252)977-3450-Fax

Driver Information Sheet

(Please Print – Must be turned into track office)

No driver will be paid without completed form

Driver: _____ Soc. Sec. #: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home #: _____ Work #: _____ Mobile #: _____

Birthdate: ____/____/____

Email Address: _____

Preferred Car #: _____ Second Car #: _____ Division: _____

Make/Model of Car: _____

Sponsors: _____ City: _____

_____ City: _____

_____ City: _____

_____ City: _____

_____ City: _____

Employer: _____ City: _____

Marital Status: Single ____ Married ____ Divorced ____

Spouse's Name: _____ Number of Children: ____

Number of years racing: _____ Number of years in current division: _____

TAX INFORMATION – PERSON 1099 TAX FORM SHOULD GO TO

Car Owner: _____ Soc. Sec. #: _____

Street Address: _____ Home #: _____

City: _____ State: _____ Zip Code: _____