



Print, complete, sign and fax to (866) 635-2395 or mail to:

Eagles Canyon Raceway  
P.O. Box 214  
Slidell, Texas 76267

## Driver's Club Application Form

### Application Instructions

- 1) Please print clearly or type all information
- 2) All required information must be provided on this form
- 3) All applications are subject to approval by the club membership committee.
- 4) This application is subject to all rules and policies described in the Driver's Club online regulations documents

### Prospective Member Information (All fields required unless N/A)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Primary e-Mail Address: \_\_\_\_\_

Secondary e-Mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License: \_\_\_\_\_ State of Issue: \_\_\_\_\_

### Immediate Family Information (All fields required unless N/A)

Spouse First Name: \_\_\_\_\_ Spouse Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Child First Name: \_\_\_\_\_ Child Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Child First Name: \_\_\_\_\_ Child Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Child First Name: \_\_\_\_\_ Child Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Child First Name: \_\_\_\_\_ Child Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License: \_\_\_\_\_ State of Issue: \_\_\_\_\_

### Membership Desired

- Executive - A one time fee (plus tax) of \$25,000, Monthly dues of \$200 (plus tax), plus immediate family, 36 guests annually
- Private - A one time fee (plus tax) of \$5,000, Monthly dues of \$250 (plus tax), plus immediate family, 12 guests annually
- Individual - A one time fee (plus tax) of \$3,250, Monthly dues of \$190 (plus tax), 6 guests annually
- Junior - A one time fee (plus tax) of \$2,750, Monthly administration fee of \$25.



**Track Vehicle Information (All fields required unless N/A)**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Street Legal? Y N  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Street Legal? Y N  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Street Legal? Y N  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Street Legal? Y N  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Street Legal? Y N  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Street Legal? Y N  
Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Street Legal? Y N

**Emergency Contact Information**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Phone (1): \_\_\_\_\_ Phone (2): \_\_\_\_\_

**Health Care Insurance Information (optional)**

*We hope we never need it, but in the unlikely event you are injured or require medical attention while participating in an event at Eagles Canyon Raceway, the local EMS provider or the health-care providers may request it.*

Company/Provider: \_\_\_\_\_ Group/Policy: \_\_\_\_\_

**Business Information (optional)**

*When Eagles Canyon Raceway has a business need, we would rather send business to our members than just look up a provider in the phone book. If you would like to be added to our "resources" list, please list your occupation and business information.*

Occupation: \_\_\_\_\_  
Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Credit Card Account Billing Information (All fields required unless N/A)**

**For daily or monthly dues and garage rental, all members are required to submit a credit card number and verification code to make the payment procedure easier. A receipt will then be forwarded to you.**

Visa     MasterCard     American Express     Discover Card

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_ \*\*CVC Code: \_\_\_\_\_

**I hereby authorize Eagles Canyon Raceway Club to charge the above credit card for any appropriate fees for events I attend, any driving guests or instructors that may accompany me, garages I rent, or any other goods and services purchased from Eagles Canyon Raceway.**

**Authorizing Signature:**

Print Name: \_\_\_\_\_ Sign: \_\_\_\_\_ Date: \_\_\_\_\_

\*\* CVC code is 3 digits found on back of Visa/MasterCard, 4 digits on front of American Express