

## Le Circuit Quyon Kart Club Membership Application



Driver Information						
<b>Driver Name</b>				Date of Birth	Race Class	Kart #
1				_		
2						
3			· · · · · · · · · · · · · · · · · · ·			
4			· · · · · · · · · · · · · · · · · · ·			
5			· · · · · · · · · · · · · · · · · · ·			
6						
Membership Type						
Type (pick one)	Quantity	Cost	Notes			
Family*	x	\$130.00				
Single	x	\$100.00				
Total:						
Payable by: Cash 🗌	Cheque Cr		_	_		
* All drivers registered under a far		st reside at t	he same pos	stal address.		
Address and Contact I						
Emergency Contact Rhone						
Emergency Contact Phone						
Medical and Waiver Gu						
All applications must in				, ,		
<ul> <li>A parent or guardian of the ASQ Minor Waiver.</li> </ul>		r the age of	18 must sig	n and attach the Parenta	al Responsibility Waiv	er and also
A parent or guardian of	any applicant unde	r the age of	18 must pro	ovide proof of age.		
<ul> <li>Any driver up to 50 year the age of 18, the Medi</li> </ul>				ned Medical Self Declara y a parent or guardian.	ition form. If the appli	cant is under
	ed by a physician ev	ery two yea		ysical exam and submit a exam years, a completed		
If accepted as a member of agree that membership in Lo Règlement Sportifs Karting, regulations.	CQKC is a privile	ge, not a ri	ight. I (we)	agree that I (we) hav	e read and will ab	ide by ASQ
Signature	of Member: _					
Signature of Paren						
•	embers under 18)					