



Arlington Raceway ATV Registration Forms

Name: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_

ATV Year, Make, Model \_\_\_\_\_

1. Hereby understand racetrack insurance will not cover ATV incidents.
2. Hereby agrees that this privilege can be revoked at any time.
3. Hereby agrees that all ATV's will be used for race related activity only.
4. Hereby understands ATV's aren't allowed on racing surface at any time.
5. Hereby agrees no one under 16 years of age will operate ATV.
6. Hereby agrees only one ATV allowed per registered race car.

Car Number \_\_\_\_\_

Car Class \_\_\_\_\_

Race Car Driver's Name \_\_\_\_\_

I have enclosed a copy of insurance for this vehicle and understand all of the above

Signature \_\_\_\_\_

Date \_\_\_\_\_