



# VARAC Membership Form 2022

If also applying for a VMC license, a current medical form must be submitted. Any medical form that includes a physician's signature attesting that you are medically fit to compete in motorsports is acceptable. A recent passport-type photo must also be supplied (unless one is already on file).

Date Submitted:

First Name:  Last Name:

Address:  Postal Code:

City:  Province:

If out of Canada, please indicate state / zip code / country:

Home Phone:  Cell Phone:

Work Phone:  Work Ext:

Email Address:

## VARAC Membership & Licence Information:

This Membership is :  NEW MEMBERSHIP  Renewal Member Since:

Current race license issued by:

No current race license - list accredited School:

Accredited race school completed:  DATE of Completion:

I am interested in participating in the VARAC Yahoo Chat Group

Interested in contributing to VARAC online content ("Pit Signals", "Vintage Racer", Press Releases etc)

I would like to be contacted for assistance in getting started with VARAC and being introduced to other members

The personal contact information I have provided in this form can be made available to other VARAC members as a means of contacting me.

## RACE CAR INFORMATION

	YEAR	MAKE	MODEL	RACE NUMBER*	GROUP

\* If you are a new member or are registering a new car that requires a new race number, email: [Membership@VARAC.ca](mailto:Membership@VARAC.ca)

IF SUBMITTING BY MAIL, PLEASE SEND CHEQUE AND THIS FORM PRINTED TO:

GAVIN IVORY 10539 Community Centre Road, Baltimore, ON, K0K 1C0