



OFFICE USE ONLY
Date Rec'd: _____
Amount: _____
Check no. _____
Cash: _____
Board Approval Date: _____

Colorado Hill Climb Association

PO Box 6366, Colorado Springs, CO, 80934

RACEceiver LAP-ALT-100 LapCeiver Audible Lap
Timer REQUIRED For all Race vehicles in 2018

2018 MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Name or Names for joint membership:

Mailing address:

City:

State:

ZIP Code:

Phone:

Alt. Ph.:

D.O.B.:

Dues and Fees

General Membership Dues: \$50 for one or \$150 for a Joint membership for two people (the joint membership includes two tickets to each race)

Lifetime Member? **Circle:** YES *No Fee. Completed Application Required.* Conf.

Competition License \$10

Co-Driver License \$10

Annual Competition Number: \$10	Class:	Req. #	Rec'd. #
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Lifetime Competition Number: \$50	Class:	Req. #	Rec'd. #
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Number on file? Circle: YES	Class:	Current #	Conf. #
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TOTAL amount enclosed: \$

NOTES:

RACEceiver LAP-ALT-100 LapCeiver Audible Lap Timer REQUIRED For all Race vehicles in 2018

I agree to abide by the Rules, Regulations and By-laws set forth by the Colorado Hill Climb Association and represent the Club in a professional manner at all times.

Signature of applicant:

Date: