

20201 TDC KART RACE

Registration Form

Contestant Name: _____

Emplo	oyer:								
Job Ti	itle: Driver	ISP	Safety Director	Owner/Manager					
Phone number for entrant:									
Email	l:								
		Aξ	greements and Re	lease					
Associat which I use pho	tion from any and a may receive while otographs taken at	all liability a attending o this event f ITA to verify	and any right to action tha or participating in this ever						
		uously emp	oloyed as a truck, step van	driver or Safety Director by my present					
2.	employer since August 1 st , 2020. I have driven and performed the regular duties of a truck driver or step van since August 1 st 2020 or performed the regular duties of a Safety Director since August 1 st 2020								
	I have not been involved in a fleet motor vehicle or motor carrier vehicle accident since August 1st 2020								
4.	ISP is exempt from certification								
Con	itestant Signature_								

Return this form along with entry fee to the Idaho Trucking Association-3405 East Overland Rd/Suite 175 Meridian Id 83642 \$45 per entry by July 2nd- \$55 after July 2nd- Deadline for entries is July 14th