

Northern California Drag Racing Association
PO Box 492021, Redding, CA 96049 530-221-1311

Membership Enrollment Form

Season Membership \$25.00

Date: _____

(Print legibly please)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Social Security Number: _____

Home Phone: _____ Work Phone: _____

Are you willing to show your car at shows, etc? Yes _____ No _____

Address to send newsletters/mailers, if different than above:

Date Dues Paid: _____ Amount \$: _____ Rec'd by: _____