



### USLMRA 2016 MEMBERSHIP APPLICATION

Complete and return with a check for \$25 payable to:

*United States Lawn Mower Racing Association*  
*P.O. Box 628*  
*Northbrook, IL 60065*

#### PERSONAL INFORMATION

Full Name:	Today's Date:        /        / Your Date of Birth:    /        /
Address:  City:                        State:                        ZIP:	Phone Number: (        ) Alternate Phone: (        ) E-Mail Address:
Gender (Circle One):    MALE    FEMALE	Occupation:
Notify In Case Of Emergency: Phone Number: (        )	Personal Physician: Phone Number: (        )
Blood Type: List Allergies:	Special Conditions / Notes:

#### RACING INFORMATION

CLASS	YOUR NUMBER (CURRENT)	MOWER MODEL	YEAR
JP			
GPK			
IMOW			
GP			
A/P			
S/P			
C/P			
B/P			
FX			
FXS			
FXT			

Please circle any USLMRA Sanctioned Local Chapter you are affiliated with:

Arizona    Arkansas    Big Dog (ND/SD/NE)    Del-Mar-Va    Florida    Georgia    Illinois    Indiana    Iowa    Kansas  
Louisiana    Mason Dixon    Michigan    Minnesota    New England    Ohio    Tennessee    Texas/Lone Star    Wisconsin