



USLMRA 2019 MEMBERSHIP APPLICATION

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

United States Lawn Mower Racing Association
 13433 Moffett Rd.
 Suite "E"
 Wilmer, AL 36587

() New () Renewal Membership # _____

PERSONAL INFORMATION Please Print all information clearly.

Full Name: _____	Today's Date: / / Your Date of Birth: / /
Address: _____ City: _____ State: _____ ZIP: _____	Home Phone: () _____ Cell Phone: () _____ E-Mail Address: _____
Gender (Circle One): MALE FEMALE	Occupation: _____
Person to Contact in Case of Emergency: Phone Number: () _____	Personal Physician: Phone Number: () _____
Blood Type: List Allergies: _____	Special Conditions / Notes: _____

RACING INFORMATION

Class	Race Number	Mower Make	Year
JP			
GPK			
IMOW			
GPS			
GPT			
AP			
CP(S)			
BP			
FXS			
FXT			

Please circle the USLMRA Sanction Chapter or State you are Affiliated with:

Alabama *Arizona *Arkansas California *Connecticut (New England) ND/SD/NE (Big Dog) *Florida (NASGRASS)
 Georgia *Illinois *Indiana *Iowa *Kansas *Louisiana *MD (Mason Dixon) *Michigan *Minnesota New York
 North Carolina *Ohio Oklahoma *Oregon Pennsylvania South Carolina Tennessee *Texas (Lone Star) Virginia
 Washington *Wisconsin NONE

* Indicates Local Chapter