



2025 FINANCIAL RESPONSIBILITY FORM

(this form to be completed by Car # Owner or Driver/Car # Owner)

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE #: _____

CAR #: _____ DRIVER'S NAME: _____

CLASS (check one):

600 WINGED

600 WINGLESS

600 RESTRICTED

270 WINGED

JR. SPRINT

QUARTER MIDGET WINGLESS

SIGNATURE: _____

DATE: _____ / _____ / _____

DRIVER'S LICENSE NUMBER: _____ STATE ISSUED: _____

The above individual is the only individual permitted to pick-up payout unless another individual is listed below:

SECOND INDIVIDUAL AUTHORIZED FOR PAYOUT PICK-UP:

NAME: _____

DRIVER'S LICENSE NUMBER: _____ STATE ISSUED: _____

**The Financial Responsibility Form needs to be completed in its entirety for each car number and driver before the car will be permitted to be inspected.*

** Person(s) listed above must present a valid Driver's License ID at the payout booth in order to receive payout.*