



**This Survey must be filled out in full to draw for qualifying position.**

Car # \_\_\_\_\_ Color \_\_\_\_\_ Can You Receive Texts (if so, what #) (\_\_\_\_) \_\_\_\_\_  
First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_  
D.O.B. \_\_\_\_\_ Website \_\_\_\_\_ Email \_\_\_\_\_

**Engine:** \_\_\_\_\_ **Chassis:** \_\_\_\_\_

**Distributor:** \_\_\_\_\_ **Ignition box:** \_\_\_\_\_

**Shocks:** \_\_\_\_\_ **Rear End:** \_\_\_\_\_

**Fuel:** \_\_\_\_\_ **Gauges:** \_\_\_\_\_

**Where do you buy your parts:** \_\_\_\_\_

**Driver Shirt size:** \_\_\_\_\_