



2021 Registration Form

Please complete and email with completed payment form to jeffgraham@canusa-apc.com. Full season registrations received by April 30th will save your number from last year or first choice of number not used in 2020. After May 1st, number selection becomes first come first serve.

**APC CMRT Safety Crew Shared Cost Deductions: APC Series Only Events - \$40 from each event individual purse payout will be deducted, APC Series

and Super Stock Events - \$20 from each event individual purse payout will be deducted. **APC Series Super Stocks DIVISION:** Team Information CAR OWNER NAME: CAR OWNER MAILING ADDRESS: **CAR OWNER CELL: CAR OWNER E-MAIL ADDRESS:** MAKE CHEQUES PAYABLE TO: **CAR OWNER DRIVER** Car Information (Please submit digital file of CAR NUMBER (List three choices in order of preference): your number with registration) SPONSORS (to be listed on website): **TEAM WEBSITE: RADIO FREQUENCY:** CAR MAKE: **CHEVROLET** DODGE **FORD** TOYOTA **ENGINE MANUFACTURER: CHEVROLET FORD Driver Information** NAME: MAILING ADDRESS: CELL: E-MAIL: DATE OF BIRTH: **HOMETOWN: EMERGENCY CONTACT: RELATIONSHIP:** PHONE NUMBER: ARE YOU APPLYING FOR ROOKIE STATUS: (see General Rules, Section 6) NO YES Registration Fees (check one) **APC Series Super Stocks** Full Season Registration - \$585.00 (Includes HST) Full Season Registration - \$169.50** (Includes HST) Registration - \$229.95 (+ \$29.89 HST) + Full Season Entry Fee - \$287.75 (+ \$37.41 HST) Registration - \$150.00 (+ \$19.50 HST) **Team must be registered at a Home Track to qualify for the points fund Select Events Only - \$259.84 + Race Entry* Registration - \$229.95 (+ \$29.89 HST = \$259.84) + Per Race Entry Fee - \$115.04 (+ \$14.98 HST = \$130.00)

*Teams running select events are subject to number availability after all full season registrations have been received.







2021 United Pacing Series

Payment Authorization Form					
DIVI	DIVISION:		ies	Super Stocks	
Credit Card Payment					
CARD HOLDER NAME:					
CREDIT CARD #:					
EXPIRY DATE:			CVD:		
PAYMENT AMOUNT:					
CARD HOLDER SIGNATURE:					
DATE:					
Interact E-Transfer Pay	ment				

SEND PAYMENT TO: jeffgraham@canusa-apc.com

IMPORTANT: Include DIVISION, DRIVER NUMBER and NAME in comments before sending