2010 Individual and Family
ANNUAL MEMBERSHIP APPLICATION

APPLICANT O NEW O PREVIOUS ROAR MEMBER ? O ADDRESS CHANGE **DATE** _____

LAST | FIRST | M.I.

ADDRESS | APT # ?

CITY | STATE | ZIP

PRIOR ROAR NO. IF KNOWN | ( ) PHONE NUMBER | E-MAIL ADDRESS

ADDITIONAL FAMILY MEMBERS

PRIOR ROAR NO. IF KNOWN | LAST | FIRST | MI

PRIOR ROAR NO. IF KNOWN | LAST | FIRST | MI

PRIOR ROAR NO. IF KNOWN | LAST | FIRST | MI

As a ROAR Member I agree to abide by all ROAR rules and safety regulations *Signature* _____

PAYMENT

MEMBERSHIP	$ 25	.....
ADDITIONAL FAMILY (Same Address)	Each $10	.....
REPLACE LOST CARD	$ 2	.....
PRINTED RULEBOOK	$ 5	
Rules are posted on-line at www.roarracing.com at no charge		.....
DECALS (10 for $5)	$ 5	.....
		.....
TOTAL AMOUNT PAID	**$**	_____

ALL PAYMENTS MUST BE IN US FUNDS

YOUR ROAR MEMBERSHIP INCLUDES:

- ROAR Information on our website
- $1,000,000 Liability Insurance Protection
- $10,000 Accident Medical Insurance
- Membership Card for ROAR Events
- ROAR Rules posted on-line at www.roarracing.com at no charge

MAKE CHECK PAYABLE TO ROAR AND MAIL TO:

ROAR Administrator
30262 Crown Valley Pkwy. # B 454
Laguna Niguel CA 92677

For Information: (949) 494 - 0515
(949) 494 - 3413 FAX
Administrator@roarracing.com
www.ROARracing.com

10-21-2009