2024 MHDRA Membership Form



Medicine Hat Drag Racing 2012 Association Box 366 Medicine Hat, AB T1A 7G1 http://www.mhdra.com (403) 548-7061

Complete entire form – Sign – Include payment (cheque preferred) – Mail (address above)

Personal Information

Last Name:		First Name:		
Address:				
City: Pi		vince:	Postal Code	·
Home Phone:	Work Phone:		_ Cell Phone:	
E-Mail Address:	Date of Birth:			
Racing Information				
Vehicle Year:		Make:	Mode	l:
Competition Class you are signing up for:		☐ Volunteer Chec	$\mu \in \$150$ (Separate chewith all BIKE, SUPER-PRO, PRO	eque post dated Sept 30, 2024 O and SPORTSMAN memberships.
		Check box with me	embership – 1 pe	r person
		☐ Super-Pro		\$185
		☐ Pro		\$185
		■ Sportsman		\$105
		□ Bike		\$185
		☐ Jr. Dragster Thu	under/Lightening	\$30
		☐ Jr. Street		\$30
		Associate		\$30
Pit Space Rental		☐ Pit Site		\$200
		☐ Waiting List		
		You must be a paid	d member to be e	ligible for a pit site
TOTAL	FEES OWING FOR	R CLASS AND PIT	RENTAL: \$	
sport, club, and facility in a positiv	HDRA, I agree to actively pare te manner. Failure to meet	articipate in fund raising, these obligations will be	maintenance, houseke met with expulsion fro	eping, marketing and promoting o
Signature:	Pare	ent/Guardian:		Date:
(Under 18 requires signature of parent or				
		FOR OFFICE USE ONLY	7	
Member #	Paid Via:		Date Received	d: