

2026 CORRIGAN OIL SPEEDWAY DRIVER'S REGISTRATION

01-05-26

Contact: spartanspeedway@gmail.com

SPECIALTY EVENTS DIVISION

****Car No:** _____

****Transponder # (if owned)** _____

*****REQUIRED INFORMATION*****

Driver Information:

**** Driver's Name:** _____ **** Date of Birth** _____

**** Are you at least 18 years old:** _____ **Yes**

**** Street Address:** _____

**** City:** _____ **** State:** _____ **** Zip:** _____

**** Phone:** (_____) _____
Home (_____) _____
Cell

**** SSN (Individual):** _____

**** email:** _____

DISCLAIMER: I understand that my signature along with the proper registration makes me a member of the Corrigan Oil Speedway Association. I agree to abide by the racing rule book of Corrigan Oil Speedway and its interpretation by officials. I hereby give my permission to use photographs of myself and/or my race car as part of their racing publicity promotions. I hereby fully and on behalf of myself, my heirs, and all third parties irrevocably, and unconditionally release and forever discharge, Corrigan Oil Speedway from any/all actions, causes of actions, demands, rights, damages, cost, expenses and fees. I agree that I consider the track is in safe racing condition when I take part in any racing activity.

I have read and understand Corrigan Oil Speedway General Rules.

**** Driver's Signature**

**** Date**