

# Mopar Nationals Golf Cart/ATV Permit Application

Date: \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Drivers License # \_\_\_\_\_ State \_\_\_\_\_

**Circle your Entry Type:** Regular (\$65) Race (\$100) Judged (\$93)

Midway/Swap Space Handicap Participant Handicap Spectator

Golf Cart/ATV Permit Request: (Brief Reason for request) \_\_\_\_\_

Type of Golf Cart/ATV \_\_\_\_\_

Drivers' Name(s) (*Driver must be age of 18 or over, and covered on the insurance policy*)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

(Mandatory - Attach proof of Insurance Certificate to application. The liability amount must be \$100,000 or more per incident)

## ***ATV/Golf Cart Rules & Regulations***

**Only insured drivers 18 years of age or older** may operate the motorized vehicle. Golf Carts/ATV's will not be allowed access to the Judged Show side of the track (west side), the Manufacturers' Midway, or the Corporate Hospitality area. This will be strictly enforced. The driver will operate the motorized vehicle in a safe manner, in regards to speed and maneuvering. **At ALL TIMES, Pedestrians have the right of way.** Golf Carts/ATV's can not be parked in aisle ways or roadways obstructing traffic flow. Any violations of these rules will be enforced by voiding the permit for the remainder of the show and there will be no refund on permit fee or golf cart rental purchase.

I certify that I have read the rules & regulations for proper Golf Cart/ATV operation, have the proper liability insurance to cover the listed drivers, and no one other than the listed drivers will operate the Cart/ATV.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Permit Fee: Friday Saturday Sunday Weekend (\$5/Day, \$15 Weekend)

Total Amount \$ \_\_\_\_\_

**Return to: Mopar Nationals, P.O. Box 2303, Dearborn, MI. 48123-2303**

**Pre-Registration DEADLINE is JULY 15**

### ***Office Use Only***

Date Received \_\_\_\_\_ Permit # \_\_\_\_\_ Permit Mail Date \_\_\_\_\_

Proof of Insurance Check # \_\_\_\_\_

18 or Over

\_\_\_\_\_ Signature