



## POLARIS 2014/2015 SNOWMOBILE RACING APPLICATION

**Due: May 1, 2014**

**Please Print Clearly!**

Today's Date: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

First Name: \_\_\_\_\_

Middle Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_

Mailing Address Including P.O. Box: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

**County** (you live in): \_\_\_\_\_

Day Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Work Phone #: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Polaris Dealer that you work with, please provide Dealer Name and Phone Number below:

\_\_\_\_\_  
(\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

Have you been on the Polaris Racing program before? YES NO If YES, when? \_\_\_\_\_

How many years have you been racing? \_\_\_\_\_ Years

Please check the **primary** venue that you are participating in as well as the Race Association.

☐ **SNO-CROSS**

☐ **IRON DOG**

☐ **HILLCLIMBS**

☐ **CROSS-COUNTRY**

☐ **GRASS DRAGS**

☐ **ICE OVALS**

You must list below the racing association that you will be in during the 2014/2015 race season.

Racing Association: \_\_\_\_\_

If you are selected to be a part of the Polaris Race Program please indicate your choice of model below:

Model: \_\_\_\_\_

TERRAIN DOMINATION



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Please list the top five accomplishments that highlighted your 2013/14 race season:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

APPLICATIONS MUST BE RECEIVED BY **MAY 1, 2014** TO THE ADDRESS BELOW:

POLARIS RACING DEPARTMENT  
ATTN: RACE APPLICATION  
10303 CALUMET AVENUE, SUITE 1  
ROTHSCHILD, WI 54474  
PHONE: 715-355-5157

**FAXED or E-MAILED RACE APPLICATIONS WILL NOT BE ACCEPTED**

Thank you,  
Polaris Race Department