



Name	Car#	Age	D.O.B	
Address	City		Zip	
Phone #	Cell #			
Class Racing	Years in Racing			
When and how did you get star	ted in racing:			
Racing Highlights:				
Goals in Racing :				
Favorite Racing Memory:				
Favorite Racing Personality:				
Major Sponsors: (Top five plea	ise)			
Family: Spouse	Children:			
Occupation:				
Pets:				
	ot racing <u>:</u>			

Please complete both sides of the Driver Profile and return to Ventura Raceway

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Name:
How did you choose your car number:
What is your favorite aspect of racing:
What was the worst thing that has happened to you in racing, or your worst season:
What would people be surprised to learn about you:
What are your other hobbies:
What are your racing plans for this season:
Favorite Music:
Favorite Food and Beverage:
Favorite Movie and TV Show:
What is your favorite way to celebrate a good race day:
Do you have a website to share with fans:
Would you be interested in being featured in the track souvenir program: NOYES

Please fill this out completely and return to Ventura Raceway so we can use this information for the program and other promotional activities during the year. You are not fully registered to compete until you return this form.