



1800 West D Street | PO Box 921 | Vinton, Iowa 52349 | 319.472.2201 | Fax 319.472.2218

I, _____, am making application for a 2016 IMCA license and intend to compete at the following tracks. I fully understand that approval and issuance of my 2016 IMCA license allows me to compete only in the IMCA division I am licensed for.

Track name and location _____

Track name and location _____

Track name and location _____

Track name and location _____

Track name and location _____

Applicant's signature _____ Date _____