



2026 Driver Registration

CAR OWNER INFORMATION:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email _____

DRIVER INFORMATION:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Email _____

WHO RECEIVES 1099 TAX FORM AND PAYMENTS: (Circle One) **Owner** or **Driver**

Payout will be via ACH unless otherwise determined by track management. Payments will be submitted via ACH the week following the race.

In order to receive payment of the purse all W-9 forms and other required documents must be completed. A new W-9 is required for each year. The racetrack will use the provided W-9 for tax purposes for all events / divisions that driver enters unless otherwise notified by the driver. Payout will be received by ACH **page 2 must be completed.**



ACH Registration:

I, _____, authorize Dixieland Motorsports, LLC to direct deposit my winnings into my bank account. I have attached a voided check or bank and checking or savings account information for ACH deposits. I understand that I must give a minimum of five working day notice to change my deposit information.

Signature

Bank Name: _____

Account # _____

Routing # _____

Attach Voided Check or Deposit Slip Here