



# Driver Resume

*Submission Required for Approval*

Driver Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Email \_\_\_\_\_

Parent Name \_\_\_\_\_ Primary Contact Ph. # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Employer \_\_\_\_\_ Spouses Name \_\_\_\_\_

## Recent Racing Summary

**2019**

Type of Car \_\_\_\_\_ Tracks \_\_\_\_\_

Type of Car \_\_\_\_\_ Tracks \_\_\_\_\_

Highlights \_\_\_\_\_

**2018**

Type of Car \_\_\_\_\_ Tracks \_\_\_\_\_

Type of Car \_\_\_\_\_ Tracks \_\_\_\_\_

Highlights \_\_\_\_\_

**2017**

Type of Car \_\_\_\_\_ Tracks \_\_\_\_\_

Type of Car \_\_\_\_\_ Tracks \_\_\_\_\_

Highlights \_\_\_\_\_

**Return to:** *Champion Racing Association / P. O Box 502 / Salem, IN 47167  
or email to: [lucett@cra-racing.com](mailto:lucett@cra-racing.com)*