



ATLANTIC REGION MOTORSPORTS INC  
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[KART@ARMSINC.CA](mailto:KART@ARMSINC.CA)

**KART LICENSE APPLICATION**

LICENSE TYPE: REGIONAL (\$35)  DAILY (\$15)  FEE PAID \_\_\_\_\_

**PERSONAL INFORMATION:**

SURNAME: \_\_\_\_\_ FIRST: \_\_\_\_\_

STREET: \_\_\_\_\_ APT # \_\_\_\_\_

CITY: \_\_\_\_\_ PROV.: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TELEPHONE: H - (\_\_\_\_) \_\_\_\_\_ W - (\_\_\_\_) \_\_\_\_\_

EMAIL: \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_

DATE OF BIRTH: DAY: \_\_\_\_ MONTH: \_\_\_\_ YEAR: \_\_\_\_

**DETAILS OF PREVIOUS LICENSE:**

LICENSE TYPE: \_\_\_\_\_ GRADE: \_\_\_\_\_

YEAR OF LICENSE: \_\_\_\_\_ LICENSE NUMBER: \_\_\_\_\_

**EXPERIENCE:**

YEAR	EVENT	CIRCUIT	EVENT STATUS	POSITION

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**REGIONAL DISCIPLINE DIRECTOR'S COMMENTS:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

REGION DISCIPLINE APPROVAL: YES  No

FORWARD APPLICATIONS AND SUPPORT DOCUMENTATION TO THE  
 REGIONAL EXECUTIVE STEWARD.

REVISED APRIL 2006