



## 2024 Local Option SERIES CERTIFICATION APPLICATION

Name / Series or Event: \_\_\_\_\_

Contact / Promoter: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

<p><b>Insurance Provider</b></p> <p>Name: _____</p> <p>Contact: _____</p> <p>Phone: _____</p> <p><b>Sanctioning body affiliation:</b></p> <p>_____ TAG USA (only)</p> <p>_____ Other: _____</p> <p><b>Classes provided:</b></p> <p>Cadet _____ Junior _____ Senior _____</p> <p>Masters _____ Endurance _____</p> <p>Any other classes: _____</p>	<p><b>Series Event Information:</b></p> <p>1. Date: _____</p> <p>Circuit: _____</p> <p>Location: _____</p> <p>2. Date: _____</p> <p>Circuit: _____</p> <p>Location: _____</p> <p>3. Date: _____</p> <p>Circuit: _____</p> <p>Location: _____</p> <p>4. Date: _____</p> <p>Circuit: _____</p> <p>Location: _____</p> <p>5. Date: _____</p> <p>Circuit: _____</p> <p>Location: _____</p>
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Once your series or event has been accepted, a link to your schedule will be placed on the TAG™ RACING website [www.tagracing.net](http://www.tagracing.net) as a “Local Option” series for **2024**.

The annual fee for certification is **\$1.00** and we ask is that your racers join TAG Racing Int. / TAG™ USA. Membership allows us to continue to provide a full set of rules and regulations.

By signing this application I agree to abide by the rules and regulations of TAG™ Racing International / TAG™ USA it's officers, officials and all assigned personnel from local to the national level.....*The TAG™ Rules and / or regulations are designed to provide for the orderly conduct of racing events and to establish minimum acceptable requirements for such events. These rules shall govern the condition of all events; all Local option series participants are deemed to have complied with these rules.*

**For Official Use Only:**

Date Received: \_\_\_\_\_ National # \_\_\_\_\_ Fee Paid: \_\_\_\_\_

P.O. Box 759 – Antioch, IL 60002

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