

OFF ROAD VEHICLE REGISTRATION FORM



COMPLETE INFORMATION AND HAVE LICENSE AND REGISTATION READY FOR VERIFICATION UPON ARRIVAL AT THE RACE POINT OVERSAND STATION

REGISTERED OWNER INFORMATION	
NAME/PERMITTEE:, LAST FIRST	
MAILING ADDRESS:	
TELEPHONE: () CELL / OTHER: ((OPTIONAL))
DRIVERS LICENSE INFORMATION	
Driver's License # State Date of Birth (Mo/Day/Yr)	Expires (Mo/Day/Yr)
VEHICLE INFORMATION VIN #	HICLE INDENTIFICATION NUMBER
YEAR: MAKE: MODEL:	
LICENSE PLATE # STATE	Expires (Mo/Day/Yr)
ACCESSORY EQUIPMENT:	
GAUGE: BOARD: TOWLINE: SHOVEL: JACK:_	*FIRE EXT:
*HOLDING TANKS TIRE SIZE:	MATCHING SPARE:
If DUAL-WHEELED: *REAR TIRE SIZE:	*MATCHING SPARE:
* Additional Equipment Requirements for Self Contained Vehicles (SCV)	
PAYMENT (money order or credit card only)	
CREDIT CARD: VISA: MASTERCARD: DISCOVER:	
7 Day ORV Permit \$50.00 =, 7 Day SCV Permit \$75.00 =	, TOTAL =
For Week(s)	
CARD NUMBER: EXPIRATION I	DATE.

SIGNATURE _____ DATE: _____