



2026 National Championship Chuckwagon Race Membership Application for Veteran Teams

Team Name: _____

Division: _____

Contact Person: _____

Contact Address: _____

Check if NEW address

Driver Name: _____

Phone: _____ Raced LESS than 10 yrs? Yes No

Cook Name: _____

Phone: _____ Raced LESS than 10 yrs? Yes No

Outrider Name: _____

Phone: _____ Raced LESS than 10 yrs? Yes No

Please fill out the above form **COMPLETELY** for each member of your team. Please list whether each member has raced for **LESS** than ten years or **MORE** than ten years in the above lists. Enclose \$25 for each member that has not raced for **MORE** than 10 years. If a person on your team is paying for his or her membership with another team, please make note of that on this form. We only need one address to send all paperwork and cards to. Forms must be completed by August 1st.

YOU MUST CALL IN TO ENTER YOUR TEAM BEFORE AUGUST 15TH!!!