



## Enrollment Form

**Membership Fee: \$50.00 per Class**

Please complete enrollment form and pay membership fee at the same time.

First Name:		Last Name:	
Address:		Forum User Name:	
		Team Name:	
City:		State / Zip:	
Phone Number:		ATV Make / Model / Year :	
E-mail Address:		Classes you are enrolling in :	

**PAYMENT METHOD**  Cash  Mastercard  Visa  Discover  American Express  Check or Money Order

Please make checks or money orders payable to **High Lifter Pro Series Racing**

Credit Card Number

Expiration Date

[ \_ \_ \_ \_ ] [ \_ \_ \_ \_ ] [ \_ \_ \_ \_ ] [ \_ \_ \_ \_ ]

\_\_\_ / \_\_\_ / \_\_\_

Validation Code

\_\_\_ \_\_\_ \_\_\_ ( 3 digit number on back of card)

Name (as it appears on card): Print \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_

Please fax to (318) 524-2297 or email to [christie@highlifter.com](mailto:christie@highlifter.com)