## 2017 Truck Driving Championships & Step Van Driving Championships Entry and Release Form

|   | (Be sure to   |  | and Release Fo  |                                  | sido)  |  |  |
|---|---|--|---|----------------------------------|--|--|--|
| Contestant's Name:  |   | e to complete Driver Information Sheet on reverse side)  Preferred Nickname: |   |                                  |  |  |  |
| Competition State:  | Arizona   |  | Hosting State Assn.:                                      | Arizona Tri                      | ucking Association   |  |  |
| Employer:   |   |  |   |                                  |  |  |  |
| Class of Competition  | (check one)   |  |   |                                  |  |  |  |
| Straight Truck (Single 2-axle vehicle)                                | ` ΄   |  | Fractor-Semitrailer<br>actor & 2-axle 53' semitrailer)    | )                                | Flatbed (3-axle tractor & 2 axle flatbed semitrailer)  |  |  |
| 3-Axle Tractor-Se   |   |  | Sleeper Berth Tractor-S<br>eeper tractor & 2-axle 53' ser |                                  | Twin Trailers (2-axle tractor & set of 28' semitrailers)   |  |  |
| 4-Axle Tractor-Se (2-axle tractor & 2-axle                            |   | Tank Tr  | uck<br>actor & 2-axle tank semitraile                     | er)                              | Step Van (Step or Package Van)   |  |  |
| ing the Step Van Driving  | Championships rule<br>er is a member of an<br>owledge and belief.       | summary; th  | nat the contestant named<br>d State Trucking Associa      | herein is eligi                  | ional and applicable appendixes includible to compete under these rules; that all information furnished about them is  |  |  |
| Step Van Driving Champi  1. I acknowledge that                        | eing permitted to part<br>onships (SVDC) and b<br>I am not in the emplo | oe eligible for<br>by of ATA or a  | awards offered to participa<br>a State Trucking Associat  | ants, I hereby s<br>tion.        | ruck Driving Championships (TDC) or stipulate and agree to the following:  |  |  |
| affiliates and the Sta<br>and any right of acti<br>or National TDC or | ate Association noted<br>on that may arise from<br>National SVDC.       | l above, its d<br>m any dama   | lirectors, employees, ager<br>ge or injury which I may r  | nts and/or any<br>eceive while a | mployees, agents and/or any of its y of its affiliates from any and all liability attending or participating in said State ight to make use of information about |  |  |
| myself and of photo<br>publicity and advert                           | graphs supplied with  | this entry for<br>ner agree to r   | rm, along with photograph<br>make myself available for    | hs subsequen                     | ortly taken under ATA's direction, in erprises arranged by ATA, with   |  |  |
| <ol> <li>I grant State Associ<br/>compete at both the</li> </ol>      | ation noted above an State and National 1                               | id ATA the rig<br>ΓDC or SVD0  | ght to exam my CDL and C.                                 | •                                | purposes of determining my eligibility to ates' TDC or SVDC while participating in   |  |  |
| said competitions.  | r ordere, raise and re  | galationio go  | vorming / vi/ vo i valional al                            | Ta, or no annia                  | 120 of 0120 mile participating in  |  |  |
| CERTIFICATION BY  | CONTESTANT. 10  | certify that du  | uring the 12 months prior                                 | to the 2017 T                    | <u>'DC</u> :   |  |  |
| employer went out of  | of business and all otl   | her eligibility  | requirements are met]; a                                  | ınd                              | exception: 11 of 12 months if previous   |  |  |
| regular duties of a to 3. I have not been invo                        | ruck driver or step val<br>olved in a fleet motor                       | n driver cons<br>vehicle or m  | stituted not less than 60% otor carrier vehicle accide    | of my work hent in the cour      |  |  |  |
| of competition indica   | ated above.   |  | (if a SVDC applicant, not domiciled in the state of       |                                  | us required endorsement(s) for the class  Occupational domiciled   |  |  |
| means the terminal,<br>6. That the class of co                        | garage or other oper mpetition I am enterir                             | rating base fi<br>ng in 2017 is  | rom which the driver norm<br>not a class in which I wo    | nally and usua<br>n at the state | ally works and/or is supervised. or regional TDC and/or competed at  |  |  |

to compete in that same class for one year if a step van competitor and two years if a competitor in any other class.

7. I further certify that I have not received any form of pay, bonus, prize or other consideration for time spent in practice as set forth in the ATA Truck Driving Championships Rules and Procedures, State and National.

and/or compete at the National SVDC in the step van class in 2015 and 2016. I understand that after winning two consecutive years at the State TDC and/or competing two consecutive years at the Nationals in that same class of competition, I am not eligible

- 8. I agree that if I compete and win the State TDC, that I will compete at the National TDC or SVDC (as applicable), unless disqualified or am detained due to a medical emergency, in which case I will notify the applicable State Trucking Association immediately.
- 9. I acknowledge that any misstatement made with respect to my eligibility for the TDC or SVDC competition may result in the forfeiture of my right to compete or in my disqualification from said competition.

## **Driver's Signature:**

## 2017 ATA Truck Driving Championships & Step Van Driving Championships Driver Information Form

| Contestant's Name:  |                         |   |   | Home Address:  |
|---|-------------------------|---|---|--|
|   | (first)                 | (middle)                                  | (last)  | (number-street) (city) (state) (zip)   |
| Class of Competition: _   |                         |   |   | Home Phone: ( ) Cell Phone: ( )  |
| Competition State:  |                         |   |   | E-mail:  |
| Employer:   |                         |   |   | Married: Yes No Spouse's Name:   |
| Employer Main<br>Office Address:  |                         |   |   | Children's name(s)/age(s):   |
| Important: Company President:   | (number-street)         | (city)                                    | (state) (zip)   | Will significant other attend the State TDC? Yes□ No□ National TDC? □Yes □No List unusual experiences, aid to motorists or at accident scene, acts of heroism: |
|   | (first)                 | (middle)                                  | (last)  | - <u> </u>   |
| Safety Director:  | (full name)             | (E-mail)                                  |   | Awards received:   |
| Safety Dir. Address:  | (mumb or otroot)        | (aib.)                                    | (ototo) (=in)   | HARP.  |
| Terminal Manager:   | (number-street)         | (city)                                    | (state) (zip)   | Hobbies: Strangest cargo ever hauled:  |
| Termin. Mgr Phone #:  | (full name)             | (E-mail)                                  |   | Do you volunteer? Where/how:  T-shirt size?  Jacket Size?  |
| Contestant's Home Terminal:   |                         |   |   | How many times have you participated in a State TDC?  How many times have you participated in a National TDC or SVDC?  |
|   | (number-street)         | (city)                                    | (state) (zip)   | <ul> <li>Below and above Info is used at Nationals to determine ND Professional Excellence Award eligibility.</li> </ul>                                       |
| Length of Service with Present Employer:  |                         | Length of Service<br>in Trucking Industry | <i>j</i> :  | Previous State/National TDC or SVDC in which you competed <i>or</i> volunteered:  Year State Competed Class Competed Rank Volunteer Role                       |
| Number of Years with No-Accident Record:  |                         | Lifetime Safe<br>Driving Miles:           |   |  |
| Number of Accidents:  | Preventable:            | No  | on-Preventable:   |  |
| Date of Last Accident:  |                         |   |   |  |
| Usual Run: Local  | I                       | Peddle                                    | Line-haul   |  |
|   |                         |   |   | (Please attached separate history sheet if additional space is needed for above listing)   |
| Is your company a member of the State  Trucking Association?  Yes State: No |                         | e: No                                     | Have you ever been a member of America's  Road Team?  Yes  Years:  No |  |
| Have you been on the sta  | ate Road Team?          | Yes Year                                  | rs: No  | Are you interested in serving on America's Road Team? Yes No   |
| For State and National publi  | icity nurnoses include  |   |   | Have you been on a company Road Team? Yes Years: No  |
| • Recent 2" X 3" (or larger)  | ) head and shoulder pho | otograph (may be e-mail                   | ed as instructed by State Champic                                     | onships Committee or hosting State Trucking Association), and  |
| <ul> <li>The name of your homet</li> </ul>  | town newspaper:         |   |   | and the nearest large city to your hometown:   |