



2025 Membership Form

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Mobile Phone _____

e-mail _____

Transponder No. _____ SRRS Permanent No. _____

WKA Membership is not required, but if you are a WKA member, please provide:

WKA No. _____ Expiration _____ Endorsement _____

Best way to send club information (i.e. newsletters, entry forms, etc.)

☐ Mail ☐ e-mail

☐ My family member is also a member, please don't send duplicate information.

Membership Type

☐ Active Member - \$35

☐ Junior Member – no charge (under 18, family member is an Active member)

Activity Interests (check all that apply)

☐ Competitor

☐ Volunteer (check all that you are interested in learning)

☐ Grid ☐ Kart Pickup ☐ Registration ☐ Timing & Scoring

☐ Scales ☐ Pre-Race Tech ☐ Post Race Tech ☐ Flagger

Please make check payable to: Southern Kart Club

PO Box 155

Grant, FL 32949

Questions? E-mail us at skc_membership@bellsouth.net

Thank you for your interest in the Southern Kart Club. Please check www.southernkartclub.com frequently for updates. See you at the races!

SKC USE ONLY

Date Received _____

Payment Type _____

Member No. _____

Amount \$ _____

Member Type _____

Entered _____

Card No. _____

Mailed _____

