



2020 Rookie of the Year

DRIVER INFORMATION

NAME: _____

PHONE NUMBERS: (H) _____ (C) _____

E-MAIL ADDRESS: _____

WEBSITE: _____

RACING HISTORY

HAVE YOU EVER COMPETED WITH THE GRANITE STATE PRO STOCK SERIES BEFORE?

_____ YES _____ NO IF YES, IN HOW MANY RACES? _____

HAVE YOU EVER WON A CHAMPIONSHIP IN A PRO STOCK OR EQUIVALENT DIVISION?

_____ YES _____ NO IF YES, WHAT TRACK OR SERIES? _____

PLEASE PROVIDE A SUMMARY OF YOUR RACING EXPERIENCE.

PLEASE FORWARD THIS APPLICATION TO THE ADDRESS BELOW. FOLLOWING A REVIEW OF THIS APPLICATION, GSPSS OFFICIALS WILL NOTIFY THE APPLICANT, VIA E-MAIL, OF THEIR ROOKIE OF THE YEAR ELIGIBILITY. ALL DETERMINATIONS WILL BE FINAL.

DRIVER SIGNATURE: _____ DATE: _____