

2017 Truck Driving Championships & Step Van Driving Championships

Entry and Release Form

Driver Entry Fee: \$100 per driver

Contestant's Name: _____

Preferred Nickname: _____

Competition State: _____

Hosting State Assn.: _____

Employer: _____

Class of Competition (check one)

- | | | |
|--|--|--|
| <input type="checkbox"/> Straight Truck
(Single 2-axle vehicle) | <input type="checkbox"/> 5-Axle Tractor-Semitrailer
(3-axle tractor & 2-axle 53' semitrailer) | <input type="checkbox"/> Flatbed
(3-axle tractor & 2 axle flatbed semitrailer) |
| <input type="checkbox"/> 3-Axle Tractor-Semitrailer
(2-axle tractor & 1-axle 28' semitrailer) | <input type="checkbox"/> 5-Axle Sleeper Berth Tractor-Semitrailer
(3-axle sleeper tractor & 2-axle 53' semitrailer) | <input type="checkbox"/> Twin Trailers
(2-axle tractor & set of 28' semitrailers) |
| <input type="checkbox"/> 4-Axle Tractor-Semitrailer
(2-axle tractor & 2-axle 53' semitrailer) | <input type="checkbox"/> Tank Truck
(3-axle tractor & 2-axle tank semitrailer) | <input type="checkbox"/> Step Van
(Step or Package Van) |

CERTIFICATION BY EMPLOYER. I hereby certify that I am aware of the provisions of Chapter V, Truck Driving Championships Eligibility Rules, of the *ATA Truck Driving Championships Rules and Procedures, State and National* and applicable appendixes including the Step Van Driving Championships rule summary; that the contestant named herein is eligible to compete under these rules; that the contestant's employer is a member of an ATA-affiliated State Trucking Association, and that all information furnished about them is true to the best of my knowledge and belief.

Employer Mgr.'s

Signature (NOT driver's): _____

Mgr.

Title: _____

AGREEMENTS AND RELEASE

In consideration of my being permitted to participate in the ATA's National and/or its affiliates' Truck Driving Championships (TDC) or Step Van Driving Championships (SVDC) and be eligible for awards offered to participants, I hereby stipulate and agree to the following:

- I acknowledge that I am not in the employ of ATA or a State Trucking Association.
- Both as to myself and my heirs and personal representatives, I release ATA, its directors, employees, agents and/or any of its affiliates and the State Association noted above, its directors, employees, agents and/or any of its affiliates from any and all liability and any right of action that may arise from any damage or injury which I may receive while attending or participating in said State or National TDC or National SVDC.
- I grant the State Association noted above and ATA and its designated agencies exclusive right to make use of information about myself and of photographs supplied with this entry form, along with photographs subsequently taken under ATA's direction, in publicity and advertising activities. I further agree to make myself available for publicity enterprises arranged by ATA, with newspaper and magazine writers and radio and television personnel.
- I grant State Association noted above and ATA the right to exam my CDL and MVR for the purposes of determining my eligibility to compete at both the State and National TDC or SVDC.
- I will be bound by all orders, rules and regulations governing ATA's National and/or its affiliates' TDC or SVDC while participating in said competitions.

CERTIFICATION BY CONTESTANT. I certify that during the 12 months prior to the 2017 TDC:

- I have been continuously employed as a truck or step van driver by my present employer [exception: 11 of 12 months if previous employer went out of business and all other eligibility requirements are met]; and
- I have driven and performed the regular duties of a truck driver or step van driver for at least 11 of the 12 months, and that my regular duties of a truck driver or step van driver constituted not less than 60% of my work hours and at least 1200 hours annually.
- I have not been involved in a fleet motor vehicle or motor carrier vehicle accident in the course of such employment.
- I have the proper class Commercial Driver's License (if a SVDC applicant, not required), plus required endorsement(s) for the class of competition indicated above.
- That I hold a CDL from or have been occupationally domiciled in the state of _____. Occupational domiciled means the terminal, garage or other operating base from which the driver normally and usually works and/or is supervised.
- That the class of competition I am entering in 2017 is not a class in which I won at the state or regional TDC and/or competed at the National TDC in 2015 and 2016 or 2014 and 2015; or if I am entering the step van class, I did not win the state or regional TDC 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 to compete in that same class for one year if a step van competitor and two years if a competitor in any other class.
- 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*.
- 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.
- 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: _____

Attach a photocopy of your MVR showing: 1) Your name and/or signature; and 2) Class of CDL (or License if SVDC applicant)

Also attach a copy of your CDL.

North Carolina Trucking Association
2017 Truck Driving Championship

NC TDC Driver Information Form
Form Must be Submitted by April 14, 2017
Via email jgarrett@nctrucking.com or Fax (919) 834-3926

Mail form and payment to:
North Carolina Trucking Association
4000 Westchase Blvd Ste. 210
Raleigh, NC 27607

If you have any questions please call Jessica at NCTA at (919) 834-0387.

First Name: _____ Last Name: _____

Class: _____ Employer: _____

City: _____ State: _____ Rookie Yes _____ No _____

Years In Trucking Industry: _____ Years with Current Employer: _____

Years of Safe CMV Driving: _____ Accident Free Miles: _____

Prior Competition Information: (State/National, Year, Class, Position)

State: _____ State: _____

State: _____ State: _____

State: _____ State: _____

NTDC: _____ NTDC: _____

NTDC: _____ NTDC: _____

Trucking Awards & Other Special Recognition:

Spouse/Significant Other: _____

Children: _____

Hobbies: _____

