



# 2026

## *Associate* MEMBERSHIP

Please fill out the form completely and enclose with a check or money order made payable to Nostalgia Drag Racing League in the amount of **\$60.00** for your NDRL Associate Membership.

**MAILING ADDRESS:**  
Nostalgia Drag Racing League  
480 Town Center Rd N #260  
Mooresville, IN 46158

**Pick up your  
Membership  
Packet at the  
NDRL Trailer**

### ***MEMBER INFORMATION***

**NAME**

**ADDRESS**

**CITY**

**STATE**

**ZIP**

**PHONE**

**EMAIL**

**RACE TEAM**

ASSOCIATED WITH

### ***MEMBER APPAREL***

CIRCLE ONE

**T-SHIRT SIZE**

☐ S

☐ M

☐ L

☐ XL

☐ 2XL

☐ 3XL

☐ 4XL

**COLOR**  
CHECK ONE

☐ BLACK

☐ WHITE

### **INCLUDED WITH YOUR MEMBERSHIP**

**MEMBER T-SHIRT**

**NDRL DECALS**

**CHAMPIONSHIP BANQUET DINNER**