

Missouri State Tractor Pullers Association 2012 Membership & Safety Certification

Name _____ Address _____
City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____
E-mail Address _____
Birth date _____ SSN _____

The undersigned guarantee that my completion vehicle, described as a
Year _____ Make _____ Model _____
Vehicle Name _____ meets or exceeds all MSTPA
Safety Requirements as outlined in the MSTPA rule book for all classes this
vehicle will pull in. Permission is granted to MSTPA, its sponsors and assignees
to publish, broadcast, or otherwise decimated any and all names and pictures of
member and/or vehicle to facilitate the advertising, promotions, and publicity of
publications authorized by the Missouri State Tractor Pullers Association.

Signature of owner _____ Date _____

State of _____ County of _____
Signed in my presence and sworn before me this _____ Day of
_____, 20_____.

Notary Public _____

My Commission Expires _____

Classes Pulled _____

Make Payout Payable to: _____

Mail to : MSTPA
Melissa Cumpton
7414 Tanner Bridge Rd
Jefferson City, MO 65101