



NASCAR YOUTH SERIES & LITTLE T QUARTER MIDGET CLUB MEMBERSHIP

Membership is open for both Nascar and the Little T Quarter Midget Club.

NASCAR YOUTH SERIES Registration

Membership is online only: [2026 NASCAR YOUTH SERIES MEMBERSHIP](https://usacracing.redpodium.com/2025-nascar-youth-series-membership)

<https://usacracing.redpodium.com/2025-nascar-youth-series-membership>

- Family Membership - \$100.00 (Primary handler, spouse and up to 4 drivers – 3 handlers are free, and then \$25 per handler afterwards) • Associate Membership - \$25.00 (no drivers)
- One Event Entry Only - \$10.00 (for non-members – no longer accepting paper applications)
- Mandatory Participant Protection, which is \$10.00 per participant (parents, drivers and handlers)
- 3.5% online processing fee
- All Nascar Rules on the website <https://nascaryouth.com>

Little T Quarter Midget Club Registration

All members must complete and sign the below application

- \$100.00 per family membership fee
- Mail completed application and check(*make check payable to Little T Quarter Midget Club*) to Little T Secretary at 205 E Thompson Rd, Thompson CT 06277 or bring to the January club meeting (last Friday of the Month) OR email the Secretary at secretary@littlespeedway.com OR PAY ONLINE [LITTLE T 2026 MEMBERSHIP PAYMENT](#)
- For new members, in addition to the completed application will need a copy of the driver(s) birth certificate(s)
- All Little T rules are found on the website <https://littlespeedway.com/rules>



LITTLE T QUARTER MIDGET CLUB MEMBERSHIP APPLICATION

Application Year: _____

Family Last Name: _____

Father/Legal Guardian First Name: _____

Email: _____

Phone: (Home/Cell/Work) and #s: _____

Mother/Legal Guardian First Name: _____

Email: _____

Phone: (Home/Cell/Work) and #s: _____

Driver #1 First Name: _____ DOB: ____/____/____ Gender: _____

Driver #2 First Name: _____ DOB: ____/____/____ Gender: _____

Driver #3 First Name: _____ DOB: ____/____/____ Gender: _____

Driver #4 First Name: _____ DOB: ____/____/____ Gender: _____

Address: _____

City, State, Zip: _____

Primary Medical Insurance Company: _____

Alternate Handler #1: _____ Email: _____

Alternate Handler #2: _____ Email: _____

Alternate Handler #3: _____ Email: _____

Alternate Handler #4: _____ Email: _____

Please include: \$100.00 (Make check payable to: Little T Quarter Midget Club) and copy of birth certificate(s) if family/driver(s) are new members

By signing this application, I/we hereby acknowledge membership to the Little T Quarter Midget Club for application year and have read the Little T Rules and Nascar Youth Series Rules. Membership will begin upon receipt of completed application with all necessary documents and fees, and is valid until December 31st of application year. Membership is subject to terms and conditions set forth in club rules and bylaws.

Signature (father/legal guardian): _____ Date: ____/____/____

Signature (mother/legal guardian): _____ Date: ____/____/____

For office use only:

USAC Registration _____ LTQMC Application _____ Payment _____ Rookie _____ B/Cert _____