

Badger Bimmers - Tech/Info Sheet
September 29th - October 1st, 2023

Event Location Road America, Elkhart Lake, WI **Event Date** Sept 29 - Oct 1, 2023

Driver's Name _____

Address _____

City, State, Zip _____

Driver's License # _____ **State** _____

Car Make _____ **Model** _____ **Year** _____ **Color** _____

Car Vehicle Identification Number (VIN) _____

Technical Inspection - Driver's / Owner's Responsibility

Pass Lights	Fail	Pass Interior	Fail
_____ Headlights L/R	_____	_____ Steering Wheel-no play	_____
_____ Front Signals L/R	_____	_____ Brake Pedal Firm	_____
_____ Rear Signals L/R	_____	_____ Seat Belts/anchors	_____
_____ Tail/Backup Lights L/R	_____		
_____ Brake Lights L/R	_____		

Pass Engine Compartment	Fail	Pass Brakes/Wheels/Tires	Fail
_____ Fan Belt-tight-no cracks	_____	_____ Shocks LF/RF/RR/LR	_____
_____ Fuel/Oil/no leaks	_____	_____ Tire Wear LF/RF/RR/LR	_____
_____ Hoses & Wiring - secure	_____	_____ Wheel Bearings LF/RF	_____
_____ Transmission - no leaks	_____	_____ Rotors LR/RF/RR/LR	_____
_____ Throttle Linkage - travel	_____	_____ Brake Fluid Reservoir - full	_____
_____ Throttle Linkage - return	_____	_____ Brake Fluid Clean - new	_____
_____ Engine Mounts - cracks	_____	_____ Brake Pads/Lines/Calipers Dry	_____

Pass Suspension	Fail	Pass Miscellaneous	Fail
_____ Suspension Travel / Noises	_____	_____ Spare Tire-Out or Secure	_____
_____ Suspension Mountings/no rust	_____	_____ Battery - Secure	_____
_____ Tie Rods - Tight	_____	_____ All loose objects removed	_____
_____ CV Joints - Tight / Dry	_____	_____ Windshield Wipers	_____

The driver agrees to abide by Badger Bimmers' Driver/Safety rules. The car's owner is solely responsible for the car's safe operating condition. Inspection by a trained mechanic is recommended but does not transfer responsibility to the mechanic.

Driver's Signature _____

Inspected By _____ **Date** _____

In emergency notify _____ **Phone#** _____ **Phone#** _____

Is this person at the track? Yes ___ **No** ___

Person at Track to notify _____ **Phone#** _____

Do you have any allergies or medical conditions that the on-site medical personnel should be aware of? Yes ___ **No** ___ **If yes, briefly describe** _____

Do you have any physical impairments that requires compensatory equipment? Yes ___ **No** ___ **If yes, briefly describe** _____

Event Day Registration - to be completed by the registrar at the track.

Group _____ **Car #** _____ **Color** _____

_____ **Helmet-Snell 2015 or newer** _____ **Waiver signed** _____ **Fee paid**
 _____ **Tech Sheet->sticker** _____ **Guests signed waiver** _____ **Wrist Bands**