

June 17-18, 2022 • Stormont-Vail Events Center • Hotel Topeka at City Center • Topeka, KS

(Be sure to complete Driver Registration on Page 2)

Contestant's Name: _____

Preferred Nickname: _____

Employer: _____

Class of Competition (check one)

Straight Truck (Single 2-axle vehicle)

CDL Requirement: Class B

3-Axle (2-axle tractor & 1-axle 28' semitrailer)

CDL Requirement: Class A

4-Axle (2-axle tractor & 2-axle 53' semitrailer)

CDL Requirement: Class A

5-Axle (3-axle tractor & 2-axle 53' semitrailer)

CDL Requirement: Class A

Sleeper Berth (3-axle sleeper tractor & 2-axle 53' semitrailer)

CDL Requirement: Class A

Tank Truck (3-axle tractor & 2-axle tank semitrailer)

CDL Requirement: Class A - (N) Tank or (X) Combined Endorsement

Flatbed (3-axle tractor & 2-axle flatbed semitrailer)

CDL Requirement: Class A

Twin Trailers (2-axle tractor & set of 28' semitrailers)

CDL Requirement: Class A - (T) Twins Endorsement

Step Van (Step or Package Van)

Minimum of 4 Contestants required to have each class

CERTIFICATION BY EMPLOYER. I hereby certify that I am aware of the provisions of Chapter V, Eligibility Rules, of the Truck Driving Championships Rules & Procedures 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 ATA-affiliated Kansas Motor Carriers Association, and that all information furnished about them is true to the best of my knowledge and belief.

Employer Manager's Signature (NOT driver's):

Manager Title: _____

AGREEMENTS AND RELEASE

In consideration of my being permitted to participate in the Kansas Professional Truck Driving Championship (TDC) and/or ATA's National TDC and be eligible for awards offered to participants, I hereby stipulate and agree to the following:

1. I acknowledge that I am not an employee of Kansas Motor Carriers Association or ATA.
2. Both as to myself and my heirs and personal representatives, I release KMCA, its directors, employees, agents and/or any of its affiliates and the ATA, 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 Kansas or National TDC.
3. I grant the KMCA 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 KMCA's and ATA's direction, in publicity and advertising activities. I further agree to make myself available for publicity enterprises arranged by KMCA and ATA, with newspaper and magazine writers and radio and television personnel.
4. I grant Kansas Motor Carriers Association and ATA the right to examine my CDL and MVR for the purposes of determining my eligibility to compete at both the Kansas and National TDC.
5. I will be bound by all orders, rules and regulations governing ATA's National and/or its affiliates' TDC while participating in said competitions.

CERTIFICATION BY CONTESTANT. I certify that:

1. I have been continuously employed as a truck or step van driver by my present employer since June 13, 2021.
Exemption for employed drivers who were out for COVID for no more than a 30 day period
2. I have driven and performed the regular duties of a truck or step van driver since June 13, 2021.
3. I have not been away from the regular duties of a professional truck driver beyond an aggregate of 30 calendar days since June 13, 2021.
4. I have not been involved in a fleet motor vehicle or motor carrier vehicle accident since June 13, 2021.
5. I have the proper class CDL or DL plus required endorsement(s) for the class of competition indicated to the left.
6. I hold a CDL (DL if Step Van) from or have been occupationally domiciled in the state of _____.
Occupational domiciled is defined as the terminal, garage or other operating base from which the driver normally works, is supervised and/or where employer is corporately headquartered.
7. I have not received any form of pay, bonus, prize or other consideration for time spent in practice as set forth in the Truck Driving Championships Rules & Procedures. I agree that if I compete and win the Kansas TDC, that I will compete at the National TDC (as applicable), unless disqualified or am detained due to a medical emergency, in which case I will notify the Kansas Motor Carriers Association immediately. I acknowledge that any misstatement made with respect to my eligibility for the TDC competition may result in the forfeiture of my right to compete or in my disqualification from said competition.

Driver's Signature: _____



- Attach a copy of your MVR showing:
 - 1) Your name and/or signature; and
 - 2) Class of CDL (or license if SVDC applicant).
- Attach a copy of your CDL



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Driver Registration must be completed in it's entirety to be eligible for State and National competition!

Contestant's Name: _____

Competition Class: _____ Competition State: _____

Home Address: _____
 Home City/State/ZIP: _____
 Home Phone: _____ Cell Phone: _____
 Email: _____
REQUIRED to receive registration confirmation
 Will spouse/guest attend the State TDC? Yes No
 If yes to above: Spouse Guest
 Spouse/Guest Name: _____
 Children Name/Age: _____

Employer: _____
 Employer Main Office Address: _____
 Contestant's Home Terminal: _____
 Terminal Manager's Name: _____
 Terminal Manager Phone: _____

Have you ever been a member of America's Road Team? Yes Years: _____ No
 Are you interested in serving on America's Road Team? Yes No
 Have you been on a company Road Team? Yes Years: _____ No
 Have you been on the Kansas Road Team? Yes Years: _____ No

Lifetime Safe Driving Miles: _____
 Number of Years: _____
 w/ No-Accident Record: _____ in Trucking Industry: _____ w/ Employer: _____
 Number of Accidents: Preventable: _____ Non-Preventable: _____
 Date of Last Accident: _____
 Usual Run: Local: _____ Peddle: _____ Line-Haul: _____
 List unusual experiences, aid to motorists or at accident scene, acts of heroism:

 Awards Received:

 Hobbies: _____
 Strangest Cargo Hauled: _____
 Volunteer Experience: _____

Below and above information is used at State to determine ND Professional Excellence Award eligibility. Please enter previous State/National TDC in which you competed or volunteered below. Attach separate page if additional space is needed.

How many times have you participated in a:
 State TDC: _____ National TDC: _____

| Year | State | Competed Class | Competed Rank | Volunteer Role |
|------|-------|----------------|---------------|----------------|
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