

# **MCTP Inc. 2020 Membership Registration Form**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE NO. ( \_\_\_\_\_ ) \_\_\_\_\_  
*(Used only for emergencies, pull date's, & cancellations)*

E-MAIL ADDRESS \_\_\_\_\_

Please list any possible driver(s) names included in your Family Membership and the tractor(s) you will be using in competition.

1. \_\_\_\_\_ TRACTOR \_\_\_\_\_ NO. \_\_\_\_\_

2. \_\_\_\_\_ TRACTOR \_\_\_\_\_ NO. \_\_\_\_\_

3. \_\_\_\_\_ TRACTOR \_\_\_\_\_ NO. \_\_\_\_\_

4. \_\_\_\_\_ TRACTOR \_\_\_\_\_ NO. \_\_\_\_\_

5. \_\_\_\_\_ TRACTOR \_\_\_\_\_ NO. \_\_\_\_\_

Annual Family Membership cost is \$40.00

*Please make check/money order payable to: **Middlesex County Tractor Pullers Inc.***

Mail Registration Form/Agreement Waiver with check/money order to:

**Jeff Martin**  
**51 Witch Meadow Road**  
**Salem, CT 06420**



[WWW.MCTP.NET](http://WWW.MCTP.NET)