



Instructor Candidate Form

Date: _____

Fee enclosed \$150.00

Name: _____

Address: _____

City/State/Zip: _____

Phone: (H) _____ (Cell) _____

Email _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Cars(s) you will be using for schools: _____

Shirt size S M L XL

Club Memberships: PCA _____ BMW _____ Audi _____ SCCA _____ Other _____

What PCA region are you a member of? _____

Date started Instructing: _____

By What Region: _____

Instructing Experience: Number of years _____ Number of Schools _____

List Tracks Instructed at and clubs, use additional pages if necessary:

Mail with payment to, Frank Todaro 7325 MacBeth Dr. Dublin, Ohio 43016.