



The Great Eastern Iowa Tractorcade 2026

Primary Driver Application

Ride Dates: June 14th-17th, 2026

(Only ONE Primary Driver Per Form)



PRIMARY DRIVER INFORMATION

(Complete ALL information and *PRINT CLEARLY*)

Primary Driver Name: _____

Address: _____

City: _____ County: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Buddy Seat Name (if applicable): _____

Phone: _____ Email: _____

(Buddy Seat MUST sign their own safety pledge and release.)

All Buddy Seats MUST comply with the following requirements and Ride Management reserves the right to reject any buddy seat. Driver and rider must be on the same plane (rider may not be higher or lower than driver). The seat may be for one (1) or two (2) riders only. No seat can hold more than two (2) riders. The seat must have handrails, backrest and seat belt or similar restraining device for each rider. The rider's feet may not dangle; there must be a footrest. Seats may not be on the fender.

Secondary Driver Name (if applicable): _____

(Secondary Drivers MUST submit their own Secondary Driver Application.)

(DRIVER INFORMATION WILL BE SENT BY EMAIL ONLY)

Name as you would like it to appear on your NAME BADGE:

(PLEASE PRINT CLEARLY, name badges cannot be changed later)

Applications are confirmed by postmark or received date (when submitted in person). Please note that applications submitted either in person or by mail on the announcement date does not guarantee a spot on the ride. Please **include non-refundable** application fee of \$165.00 with form. (Application fee includes one t-shirt size S through XL). Applications which cannot be accepted because the available slots are filled will be held and placed on a waiting list in case of cancellations. Confirmation letters will be sent by email to accepted applicants within 4-6 weeks following the close of registration. **Mail Applications to Tractorcade – KXEL NRG Media, LLC 1065 N. Center Point Rd., Hiawatha, IA 52233.** Applications by mail must be postmarked on or after the date of the route announcement. Applications submitted in person or postmarked prior to the announcement date will not be accepted. KXEL reserves the right to limit the number of tractors in the ride in order to control traffic and other administrative tasks.

FEES ENCLOSED: (Make check payable to KXEL 2026 Tractorcade.)

Application: \$165 + T-Shirts: _____ = **TOTAL AMOUNT:** _____

T-SHIRT INFORMATION:

Applicant T-Shirt (no additional charge): Small ____ Medium ____ Large ____ XL ____

Applicant T-Shirt (\$5 additional charge): 2XL ____ 3XL ____

Additional T-Shirts (\$10 each): Small ____ Medium ____ Large ____ XL ____

Additional T-Shirts (\$15 each): 2XL ____ 3XL ____

Have you been a **PRIMARY DRIVER** on The Great Eastern Iowa Tractorcade in the past (if yes, how many years)? Yes (Years) _____ No _____ (2026 is the 27th year of Tractorcade.)

MEDICAL AND EMERGENCY CONTACT INFORMATION

(Complete ALL information and *PRINT CLEARLY*)

Emergency Contact: Name: _____ Cell Phone: _____

Physician's Name / Phone AND any medical issues we should know about: _____

TRACTOR INFORMATION

Tractor Make: _____ Model: _____ Year: _____

Fuel Type: Gas ____ LP ____ Diesel ____ Other ____

Preferred traveling speed - Tractor speed is used to determine group placement. **CHOOSE YOUR SPEED CAREFULLY!** You need to be able to maintain this speed at ALL TIMES.

10 mph ____ 11 mph ____ 13 mph ____ 14+ mph ____

If several drivers want to travel together, CHOOSE ONE NAME and have ALL GROUP MEMBERS WRITE THAT NAME: _____

FOR OFFICE USE ONLY:

Date Received: _____

Taken by: _____

Check Number: _____

Amount: _____

Remitter: _____

Applicant: _____

PRIMARY DRIVER SAFETY PLEDGE AND RELEASE

I, [REDACTED], hereby pledge to hold safety as the highest priority on The Great Eastern Iowa Tractorcade 2025. The safety of my fellow riders and the public traveling on the route is of the utmost importance. I pledge to obey the following rules:

- To hold a valid driver's license (We WILL check your license during registration).
- To follow all traffic laws.
- To not carry riders except in an approved buddy seat.
- To stay with my assigned group.
- To depart during my assigned group's designated time.
- To not have bicycle companions.
- To not pull campers or trailers. Small carts permitted. 6ft max (hitch to tail) LENGTH LIMIT WILL BE ENFORCED.
- To post SMV sign.
- To follow designated route.
- To abide by the decisions of KXEL and/or the Ride Management Team based on the National Weather Service, in the event of inclement weather.
- To utilize a rearview mirror when possible. REVIEW MIRRORS ARE REQUIRED.
- To stay on my tractor at all times until we have reached our destination, even if tractors come to a complete stop on the road.
- I understand violating these rules will result in the denial of all future applications. Repetitive violators will be asked to leave the ride per the Ride Management Team.

I, for myself and my personal representatives, heirs, successors, and assigns, in consideration for being involved in Tractorcade ("event"), hereby hold harmless, release, indemnify and discharge from liability NRG Media, LLC, its stations, including KXEL, members, parents, subsidiaries, affiliates, agents, employees, contractors, sponsors, officials and volunteers associated with this event (the "released parties") from all liability, claims, judgments, demands, controversies, agreements, damages, actions, and causes of action whatsoever, arising out of or in any way related to my participation in the event or any related activities whether in law or equity, no matter what the cause or nature, and I further waive any claim that I might state or assert against any of the released parties which I have or may have at any time arising out of my association with, travel to or from, or participation in the event, or in any other way related to or resulting from the event. I acknowledge that I have full knowledge and understanding of the risks involved in this event, including the physical demands. I affirm I am physically able and sufficiently trained to participate in this event and I freely accept any and all risks associated with my participation and this event. I affirm that the tractor I will use is in good repair and sufficient working order to participate in this event. I acknowledge and understand the risks to the tractor and freely accept those risks. I understand KXEL reserves the right to reject any application at any time for any reason. I consent to the use of my name, voice, image, or likeness without compensation in all media for news reporting, publicity and advertising in perpetuity.

Primary Driver Signature: [REDACTED] Date: [REDACTED]

Are you interested in being a (please check all that apply):

Group Leader: _____ Emergency Medical Contact: _____ Sunday Volunteer: _____

BUDDY SEAT SAFETY PLEDGE AND RELEASE

I, [REDACTED], hereby pledge to hold safety as the highest priority on The Great Eastern Iowa Tractorcade 2025. The safety of my fellow riders and the public traveling on the route is of the utmost importance. I pledge to obey the following rules:

- To hold a valid driver's license (We WILL check your license during registration).
- To follow all traffic laws.
- To not carry riders except in an approved buddy seat.
- To stay with my assigned group.
- To depart during my assigned group's designated time.
- To not have bicycle companions.
- To not pull campers or trailers. Small carts permitted. 6ft max (hitch to tail) LENGTH LIMIT WILL BE ENFORCED.
- To post SMV sign.
- To follow designated route.
- To abide by the decisions of KXEL and/or the Ride Management Team based on the National Weather Service, in the event of inclement weather.
- To utilize a rearview mirror when possible. REVIEW MIRRORS ARE REQUIRED.
- To stay on my tractor at all times until we have reached our destination, even if tractors come to a complete stop on the road.
- I understand violating these rules will result in the denial of all future applications. Repetitive violators will be asked to leave the ride per the Ride Management Team.

I, for myself and my personal representatives, heirs, successors, and assigns, in consideration for being involved in Tractorcade ("event"), hereby hold harmless, release, indemnify and discharge from liability NRG Media, LLC, its stations, including KXEL, members, parents, subsidiaries, affiliates, agents, employees, contractors, sponsors, officials and volunteers associated with this event (the "released parties") from all liability, claims, judgments, demands, controversies, agreements, damages, actions, and causes of action whatsoever, arising out of or in any way related to my participation in the event or any related activities whether in law or equity, no matter what the cause or nature, and I further waive any claim that I might state or assert against any of the released parties which I have or may have at any time arising out of my association with, travel to or from, or participation in the event, or in any other way related to or resulting from the event. I acknowledge that I have full knowledge and understanding of the risks involved in this event, including the physical demands. I affirm I am physically able and sufficiently trained to participate in this event and I freely accept any and all risks associated with my participation and this event. I affirm that the tractor I will use is in good repair and sufficient working order to participate in this event. I acknowledge and understand the risks to the tractor and freely accept those risks. I understand KXEL reserves the right to reject any application at any time for any reason. I consent to the use of my name, voice, image, or likeness without compensation in all media for news reporting, publicity and advertising in perpetuity.

Buddy Seat Signature: [REDACTED] Date: [REDACTED]

Are you interested in being a (please check all that apply):

Emergency Medical Contact: _____ **Sunday Volunteer:** _____



CREDIT CARD PAYMENT FORM

DATE: _____

MARKET: Cedar Rapids Waterloo

STATION: KXEL Tractorcade

INVOICE #: _____

INVOICE DATE: _____

AMOUNT: _____

VISA

MASTERCARD

DISCOVER

CC ACCOUNT #: _____

CC EXPIRATION DATE: _____ 3-DIGIT SECURITY CODE: _____

CARDHOLDER NAME: _____

CARDHOLDER ADDRESS: _____

CITY, STATE, ZIP CODE: _____

CARDHOLDER PHONE: _____

CARDHOLDER SIGNATURE: _____

Would you like a receipt? _____

Email or Fax # for receipt: _____

Person Completing Form: _____

Bus Mgr Approval: _____