



To enter the Truck Driving Championship,
Please complete and mail the items below:

1. MTA Registration Forms
2. ATA TR1
3. ATA TR2
4. Current MVR
5. Copy of Driver's CDL
6. Copy of Driver's Medical Certificate
7. \$250 Driver Registration Fee *
 - ▶ Payable to Mississippi Trucking Association

DEADLINE FOR REGISTRATION: Thursday, MARCH 19, 2026

***Late entries will be required to pay a \$50 late fee.**

ABSOLUTELY NO ENTRIES WILL BE ACCEPTED AFTER MARCH 26, 2026

Mail documents to:

Mississippi Trucking Association
Attn: Steve Boudreaux
825 N President Street
Jackson, MS 39202

Questions?

Call Steve at 601.354.0616



2026 MTA TRUCK DRIVING CHAMPIONSHIP SEAWAY ROAD LOT, GULFPORT, MS

MAY 1- 2, 2026

ATA TDC rules are followed

- To be eligible to compete in the Mississippi Truck Driving Championship, the driver must:
 - Be accident free from May 5, 2025, to April 30, 2026.
 - Be a full-time truck driver- spotters, hostlers, etc. are not eligible.
 - Have driven and performed the duties of a professional truck driver for your company for at least 12 months prior to entry.
 - Live in Mississippi or operate out of a MS terminal
- Companies must be members of the MTA to enter drivers into the competition.
- Companies may enter as many drivers in each class of competition as they wish.
- All companies with drivers competing must have representatives present at the TDC to be assigned work duties during the two-day event. Companies must provide at least one worker for every five drivers they register.
- Drivers may not drive in any class unless his/her driver's license shows that class's endorsement.
- Once a driver is designated on the entry form to a certain class, the driver will not be allowed to switch classes.
- If a tie occurs, the contestant with the least amount of drive time wins.
- Decisions of the judges and the MS TDC Committee are final.
- No registration will be accepted without the driver's registration fee.

DRIVER'S REGISTRATION FEE: \$250 /driver

DEADLINE FOR REGISTRATION: Thursday, MARCH 19, 2026

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COMPANY TOTALS

Company Name_____

Company Billing Address_____

CLASS	NUMBER OF DRIVER ENTRIES
Straight Truck	
3-Axle	
4-Axle	
5-Axle	
Sleeper Berth	
Tanker	
Flatbed	
Twins	
Step Van	
TOTAL	



CREDIT CARD PAYMENT

Company Name _____

Contact Name _____

Contact Number _____

Contact Email _____

Master Card

Visa

American Express

Name on Card _____

Credit Card Number _____

CVC Number _____ Expiration Date _____

Amount Paid \$ _____

Signature _____



TRUCK DRIVING CHAMPIONSHIP HOTEL INFORMATION

Group Code: MS TRUCKER ASSOCIATION RODEO

Quality Inn: 20+ Rooms available (King or Double Queen)

9445 Highway 49 Gulfport, MS 39503

Phone: (228) 868-3300

Call the hotel directly to reserve your rooms.

RATES: April 30- \$69.00

May 1-3- \$99.00/night

Best Western Seaway: 50-60 Rooms available (King or Double Queen)

9475 Highway 49 Gulfport, MS 39503

Phone: (228) 864-0050

Call the hotel directly to reserve your rooms.

RATES: April 30- \$89.00

May 1-3- \$124.00/night

Holiday Inn: 50 Rooms available (King or Double Queen)

9515 Highway 49 Gulfport, MS 39503

Phone: (228) 679-1700

Call the hotel directly to reserve your rooms.

RATES: April 30- \$109.00

May 1-3- \$139.00/night

DEADLINE TO RESERVE HOTEL ROOMS: FRIDAY, APRIL 3, 2026

Questions? emily.ellzey@whitestonetrans.com

(Be sure to complete Driver Registration on Page 2)

Contestant's Name: _____

Preferred Nickname: _____

Competition State: _____

Hosting State Association: _____

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)

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 appendices 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 an ATA-affiliated State Trucking Association; that the contestant's employer will indemnify, defend, and hold harmless the ATA and State Trucking Association and any other contestant, attendee, and equipment donor for any claims, damages, losses, expenses to the extent caused by the negligence or willful misconduct of the contestant, 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 ATA's National and/or its affiliates' Truck Driving Championships (TDC) or Step Van Driving Championships (SVDC) and be eligible for awards offered to participants, I hereby stipulate and agree to the following:

1. I acknowledge that I am not in the employ of ATA or a State Trucking Association.
2. Both as to myself and my heirs and personal representatives, I release ATA, its directors, employees, agents and/or any of its affiliates and the State Association listed to the left, 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 said State or National TDC or National SVDC.
3. I grant the State Association listed to the left 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 ATA's direction, in publicity and advertising activities. I further agree to make myself available for publicity enterprises arranged by ATA, with newspaper and magazine writers and radio and television personnel.
4. I grant State Association listed to the left and ATA the right to examine my MVR for the purposes of determining my eligibility to compete at both the State and National TDC or SVDC.
5. I will be bound by all orders, rules and regulations governing ATA's National and/or its affiliates' TDC or SVDC 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 during the 12 months prior to the 2026 TDC.
2. I have driven and performed the regular duties of a truck or step van driver during the 12 months prior to the 2026 TDC.
3. I have not been away from the regular duties of a professional truck driver beyond an aggregate of 30 calendar days during the 12 months prior to the 2026 TDC.
4. I have not been involved in a **Preventable** fleet motor vehicle accident during the 12 months prior the 2026 TDC. See TDC Rules and Procedures, Appendix I for determining non-preventable accident eligibility.
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 SVDC) 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 served as a member of any State Trucking Association's Truck Driving Championships Committee during the 12 months prior to the 2026 TDC / NTDC.
Competing drivers may still serve as volunteers and support for State Truck Driving Championships and National Truck Driving Championships in which they are not competing.
8. That the class of competition I am entering in 2026 is not a class in which I won at the state or regional TDC and/or competed at the National TDC or National SVDC in 2024 and 2025. I understand that after winning two consecutive years at the State TDC and/or competing two consecutive years at the Nationals in that same class of competition, I am not eligible to compete in that same class for one year if a step van competitor and two years if a competitor in any other class.
9. 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 State TDC, that I will compete at the National TDC or SVDC (as applicable), unless disqualified or am detained due to a medical emergency, in which case I will notify the applicable State Trucking Association immediately. I acknowledge that any misstatement made with respect to my eligibility for the TDC or SVDC 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).



2026 STATE AND NATIONAL TRUCK DRIVING CHAMPIONSHIPS & STEP VAN DRIVING CHAMPIONSHIPS

Driver Registration

Driver Registration must be completed to be eligible for National competition!

Contestant's Name: _____

Contestant's Name Pronunciation: _____

Competition Class: _____ Competition State: _____

Home Address: _____

Home City/State/ZIP: _____

Home Phone: _____ Cell Phone: _____

Email: _____

REQUIRED to receive registration confirmation

Spouse/Guest Name: _____

Children Name/Age: _____

Employer: _____

Employer Main Office Address: _____

Contestant's Home Terminal: _____

Safety Manager Name: _____

Safety Manager Phone: _____

Safety Manager Email: _____

If different than safety manager:

Registration Manager Name: _____

Registration Manager Phone: _____

Registration Manager Email: _____

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:

Volunteer Experience:

Below and above information is used at Nationals to determine ND Professional Excellence Award eligibility. Please enter previous State/National TDC or SVDC 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



To: Mississippi Trucking Supporters

From: John Maddox, 2026 MTA Safety Council Chairman

Jason Matte, 2026 MTA TDC Chairman



The 2026 Mississippi Truck Driving Championship is just around the corner, and we need your support to make it a success! Sponsorship is essential, as registration fees alone do not cover the full cost of the event. Please review the sponsorship options below and choose the level that best fits your budget.

Join us in Gulfport, MS on May 1–2, 2026, and be part of this exciting event!

- ☐ **CHROME** (\$1,250 Minimum Donation)
 - Display area at competition, if desired
 - Recognition on Sponsor Banner at competition
 - 8 x 10 sponsorship plaque presented at competition
 - Verbal & printed recognition in the program
- ☐ **STEEL** (\$1,000 Minimum Donation)
 - Display area at competition, if desired
 - Recognition on sponsor banner at competition
 - 8 x 10 sponsorship plaque presented at competition
 - Verbal & printed recognition in the program
- ☐ **ALUMINUM** (\$500 Minimum Donation)
 - Display area at competition, if desired
 - Recognition on sponsor banner at competition
 - 5 X 7 sponsorship plaque presented at competition
 - Verbal & printed recognition in the program
- ☐ **RUBBER** (\$250 Minimum Donation)
 - Display area at competition, if desired
 - Verbal & printed recognition in the program
- ☐ **OTHER** (I can give \$_____ this year.)

Contact Name _____

Company Name _____

Address _____

Telephone _____ Email Address _____

Please return this form to the Mississippi Trucking Association Safety Management Council by fax (601.354.4371) or email (emilyellzey@whitestonetrans.com), and you will be invoiced for the amount indicated.

Thank you for your support in this year's event. We look forward to seeing you there!

**2026 MTA SAFETY MANAGEMENT COUNCIL
FLEET SAFETY CONTEST
FOR THE YEAR: 2025**



MILEAGE CATEGORIES:

LOCAL Operations: Transportation wholly within a municipality or contiguous municipalities or wholly within a commercial zone as defined by the ICC or the regulatory agency having jurisdiction.

INTERCITY Operations: Operations beyond commercial zones or urban-suburban areas including peddle runs, short-haul operations, and intercity operations.

LOCAL

0 – 1 MILLION MILES

OVER 1 MILLION MILES

INTERCITY

500,000 – 2 MILLION MILES

OVER 2 MILLION MILES

1. List the number of **Mississippi** miles traveled and the number of accidents that occurred whether they are DOT reportable or not.
2. MTA will figure your frequency ratio for you. The formula used is:

$$\text{FREQUENCY} = \frac{\text{Number of Accidents} \times 1,000,000}{\text{Total MS Miles}}$$

RATIO

All awards will be presented on Saturday, May 2, 2026, following the competition

Company Name _____

Address _____

Safety Director _____

Email _____

TOTAL ACCIDENTS

INTERCITY _____

LOCAL _____

TOTAL MS MILES

INTERCITY _____

LOCAL _____

I hereby certify that the information submitted above is correct to the best of my knowledge.

Signature

Title

DEADLINE TO ENTER: MARCH 12, 2026*

steveb@mstrucking.org or Fax 601.354.4371 ATTN: Steve

***Note that the deadline is earlier than the TDC deadline!!**

**2026 MISSISSIPPI
DRIVER OF THE YEAR
NOMINATION FORM**



Basis for Nomination: A driver may be nominated for several reasons - outstanding deeds, highway safety, or a long record of safe and courteous driving. You are encouraged to submit your driver for consideration.

Driver's Name _____

Home Address _____

Phone Number _____ Age _____

Email _____

Social Security Number _____

Spouse's Name, if applicable _____

Children's Names _____

Employer _____

Employer's Address _____

Driver's Home Terminal Address _____

Years of Commercial Driving _____ Total Accident-Free Miles _____

Comments _____

Nominee's Signature _____

Company Official Signature _____

Printed Name _____ Title _____

Additional pages can be included if needed to enhance the driver's resume for consideration.

DEADLINE TO ENTER: MARCH 12, 2026*

steveb@mstrucking.org or Fax 601.354.4371 ATTN: Steve

***Note that the deadline is earlier than the TDC deadline!!**