



Season Year: _____

Membership Application

PLEASE PRINT CLEARLY

Member ID # _____

NAME _____

Age: _____

Address _____

City _____ State _____ Zip _____

EMAIL _____

AMA# _____ Exp Date _____ Phone # _____

Shirt Size _____

Birth Date _____

EMERGENCY CONTACT

Name _____ Phone # _____ Relationship _____

Member Release and Indemnity Agreement

I hereby forfeit all rights to sue or make any claim for damages due to negligence or any other reason whatsoever against MCMotoPark Inc, American Motorcycle Association, their respected district organizations, the promoters, sponsors and all other persons, participants or organizations conducting or connected with any event for injury to property or person I may suffer, including crippling injury or death while participating in any event and while on the premises.

I know the risk of danger to myself and my property, while preparing for and participating in any event and while on the premises, and relying in my own said judgment and ability, assume all such risks of loss and hereby agree to reimburse all costs to those persons or organizations connected with any event for damages incurred as a result of my negligence.

I HAVE READ AND UNDERSTAND THIS RELEASE _____ **(INITIALS)**

Signature of APPLICANT _____ Date _____

Witness Signature _____ Witness Name Printed _____

MINOR APPLICANTS UNDER THE AGE OF 18 **CONTINUE**
TO THE BACK SIDE OF THIS FORM

OVER 18 APPLICANTS ARE COMPLETE.... Let's Ride!!

MINOR APPLICANT INFORMATION

Minor Applicant's First/Last Name _____ Minor's AGE _____

Parent/Guardian Information

Parent or Legal Guardian's First/Last Name _____

Phone Number _____ Alt Number _____ Relationship _____

MINOR Member Release and Indemnity Agreement

I hereby forfeit all rights to sue or make any claim for damages due to negligence or any other reason whatsoever against MCMotoPark Inc, American Motorcycle Association, their respected district organizations, the promoters, sponsors and all other persons, participants or organizations conducting or connected with any event for injury to property or person I may suffer, including crippling injury or death while participating in any event and while on the premises.

I know the risk of danger to myself and my property, while preparing for and participating in any event and while on the premises, and relying in my own said judgment and ability, assume all such risks of loss and hereby agree to reimburse all costs to those persons or organizations connected with any event for damages incurred as a result of my negligence.

I have discussed the event that I wish to participate in with my parent/legal guardian and they have explained to me the possibility of my being injured. I understand what they have explained to me, and I know that I could be injured, possibly severe or even worse death.

I am willing to assume the responsibility of this in order to be a participant in the event that I wish to participate in. I also agree that at any point, if I feel endangered either by my own actions or those of others, that I am free to withdraw from the event, and will do so of my own free will.

Parent/Legal Guardian: I HAVE READ AND UNDERSTAND THIS RELEASE _____ (INITIALS)

MINOR: I have fully read or have been read the above and understand the risk,

I fully understand what it means and have signed it voluntarily _____ (INITIALS)

Signature of Minor APPLICANT _____ Date _____

Signature of Parent/Legal Guardian _____ Date _____

Witness Signature _____ Witness Name Printed _____

2nd MINOR FORM Must be Signed and Attached to

Application and noted on MEMBERS CARD