

**COMPETITION EVENT ENTRY APPLICATION**

**SPORTS COMMITTEE - DISTRICT 37 AMA, INC.**

<b>DESERT</b> District 37 Riding #	<b>RIDING CLASS (Circle One)</b> Beginner Novice Intermediate Expert	<b>BIKE DIVISION(Circle One)</b> 251-OPEN 201-250 0-200 QUAD 0-85 MINI (12-15 yrs old)	<b>SPECIAL DIVISION (Circle One Max)</b> 30+ (Vet) 60+ (S Sr) 40+ (Sr) WOMEN 50+ (Mag) SIDEHACK <input type="checkbox"/> CHECK FOR ONE LOOP RIDER
<b>ENDURO</b> District 37 Riding #	<b>RIDING CLASS(Circle One)</b> A B C D	<b>BIKE DIVISION(Circle One)</b> 251-OPEN 201-250 0-200 QUAD 0-85 MINI (12-15 yrs old)	<b>SPECIAL DIVISION (Circle One Max)</b> 30+ (Vet) 60+(S Sr) 40+ (Sr) WOMEN 50+ (Mag) <input type="checkbox"/> CHECK FOR ONE LOOP RIDER
<b>GRAN PRIX</b> District 37 Riding #	<b>RIDING CLASS(Circle One)</b> Beginner Novice Intermediate Expert	<b>BIKE DIVISION(Circle One)</b> 251-OPEN 201-250 0-200 QUAD 0-85 MINI (12-15 yrs old)	<b>SPECIAL DIVISION (Circle One Max)</b> 30+ (Vet) 60+ (S Sr) VINTAGE 40+(Sr) 4-STROKE CLASSIC 50+ (Mag) WOMEN EVOLUTION SIDEHACK

MOTORCYCLING IS A DANGEROUS SPORT

(Please PRINT):

NAME OF ENTRANT \_\_\_\_\_ AMA #. \_\_\_\_\_ EXPIRES \_\_\_\_\_

AGE \_\_\_\_\_ TELEPHONE ( ) \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

I am a bonafide member of the \_\_\_\_\_

Make of Motorcycle \_\_\_\_\_ Engine Size \_\_\_\_\_

EVENT: \_\_\_\_\_

LOCATION \_\_\_\_\_

We are entering as a team: YES NO Team Members: 1. \_\_\_\_\_ 2. \_\_\_\_\_

**ENTRANT RELEASE AND ASSUMPTION OF RISK AGREEMENT**

Entrant acknowledges the substantial risk of injury to person and property resulting from participation in motorcycling events and further acknowledges that such injury and damage can be caused by the negligent acts and omissions of persons and organizations connected with the conduct of such events.

**Entrant hereby assumes all risk of injury or damage resulting from participation in this motorcycling event** and releases Sports Committee District 37 A.M.A., Inc. (District 37), The American Motorcyclist Association, Bureau of Land Management, sponsoring Clubs and Organizations, Promotors, Officials, Fellow Participants, Landowners and those acting in their support or on their behalf from any and all liability arising by a negligent act or omission or otherwise resulting in personal injury or property damage to participant, participant's property, or participant's family.

Entrant has medical insurance which will pay for any medical expenses arising from injuries suffered in this event. Entrant will not seek payment or reimbursement for expenses incurred for medical services and treatment resulting from injuries suffered in this event from any of the persons or organizations listed above.

**I HAVE READ THIS AGREEMENT AND I UNDERSTAND ITS TERMS**

Signed \_\_\_\_\_ Date \_\_\_\_\_

The undersigned does hereby certify that he or she is a duly qualified rider having been so qualified by a competent organization.

**(Circle One)** Beginner Novice Intermediate Expert or Enduro Class A B C D

It is further understood and agreed that in the event I am injured from whatsoever cause during the event covered by the application, I herewith consent to and authorize first aid and ambulance service as provided by the sponsoring club or property owner, and further hold all parties harmless from any consequences of said aid.

Under the rules and sanctions of the American Motorcyclist Association, I hereby agree to conform and comply with the rules governing this contest.

Signature of entrant: \_\_\_\_\_ Date \_\_\_\_\_ 20 \_\_\_\_\_

**ENTRANT UNDER 18 YEARS OF AGE**

**MUST COMPLETE SEPARATE NOTARIZED RELEASE (contact club)**