

Parental Permission Letter

I/WE, _____, give permission for MY/OUR minor
child, _____, to participate in the
Motosports events being held at (Track Name) _____
on (Event Date) _____. I understand the risk
involved with these events and understand no medical coverage is
provided in the event of injury.

I give permission for (name of adult accompanying minor)

to sign any forms in my absence and to make any necessary medical
decisions on my behalf.

Notary Public

State of Indiana
County of _____

Signed and sworn to (or affirmed) before me on this _____ day of _____,

20____, by _____ (Name of Individual making
statement)

Seal

Signature of Notary Public

My Commission Expires: _____