



LSFTA REGISTRATION FORM - 2024



RACE EVENT/LOCATION: _____

DATE: _____

**PLEASE SELECT CLASSES BY ENTERING AN "X" IN THE CLASS FEE COLUMN		
PRO CLASSES	\$60/CLASS	BIKE MAKE, MODEL AND NUMBER(#)
OPEN PRO		
PRO SINGLES		
PRO TWINS		
450CC PRO		
VINTAGE PRO SINGLES		
VINTAGE PRO TWINS		
TOTAL:	\$ -	
AMATEUR CLASSES	\$40/CLASS	BIKE MAKE, MODEL AND NUMBER(#)
250CC AM		
450CC AM		
OPEN AM		
PRO AM		
VINTAGE SINGLES		
VINTAGE TWINS		
TOTAL:	\$ -	
KIDS CLASSES	85CC = \$20	BIKE MAKE, MODEL AND NUMBER(#)
50CC BEGINNER (FREE)		
50CC ADVANCED (FREE)		
65CC (FREE)		
85CC		
TOTAL:	\$ -	
SPECIALTY CLASSES	\$40/CLASS	BIKE MAKE, MODEL AND NUMBER(#)
HOOLIGAN		
BRAKELESS		
250/360 2-STROKE		
KNOBBY		
PIT BIKE		
MILITARY APPRECIATION (FREE)		
QUAD - 0 TO 450CC		
QUAD - 450CC+		
SPEEDWAY		
TOTAL:	\$ -	
MAD DAWG (4-STROKE ONLY)	\$40/CLASS	BIKE MAKE, MODEL AND NUMBER(#)
CLASSIC (MAX 176CC)		
SUPER (177CC+)		
TOTAL:	\$ -	
WOMEN	\$40/CLASS	BIKE MAKE, MODEL AND NUMBER(#)
14 AND OVER (Min. 85CC)		
UNDER 14 (Max 85CC)		
TOTAL:	\$ -	
AGE CLASSES	\$40/CLASS	BIKE MAKE, MODEL AND NUMBER(#)
+30 YEARS		
+40 YEARS		
+50 YEARS		
+60 YEARS		
+70 YEARS		
TOTAL:	\$ -	

RIDER INFO

NAME: _____

AGE: _____

DOB: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

SOCIAL: _____

MEDIA: _____

GUARDIAN INFO (if minor) - please identify BOTH guardians, where applicable

NAME(s): _____

PHONE(s): _____

EMERGENCY CONTACT

NAME: _____

PHONE: _____

SIGNATURE (Guardian Signature if minor/under 18 - BOTH Guardians required to sign, where applicable): **Participant and/or Guardian agrees to use of electronic signature as equivalent to handwritten signature.

PAYMENT INFORMATION

TOTAL PAYMENT AMOUNT: _____

PAYMENT METHOD (Please mark with an "X"):

CASH: _____

CC: _____

VENMO: _____

VENMO

@Lonestarflattrack

venmo

** By signing above in the designated area, I assume all personal liability (or liability as the Guardian for the minor identified above) for injuries or damages of any nature while participating in Lone Star Flat Track Association (hereby referred to as LSFTA) races or while on the property of any LSFTA event(s). I understand that this liability is in force for this date, all future dates, and any events in which I attend, or participate in as part of a LSFTA event. If for any reason this form is found to be improper, I fully understand the intent and purpose of this document is to dismiss **ANY AND ALL** liability brought forth towards LSFTA, its Board or directors, volunteers, staff, and/or property or venue owners.