



# Membership Form

## 2024-25 Racing Series

Rider Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ & Phone #: \_\_\_\_\_

24/25 Annual Membership Due:

Adult (13+) \$30 \_\_\_\_\_

Child (5-12) \$20 \_\_\_\_\_

Daily Membership Due: \$10 \_\_\_\_\_ (race 3 times pays for full year)

Dates of Daily Due: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**This is a release Indemnity Agreement** – Read before Signing: I here give up all rights to sue or make claim for damages or whatsoever against the Southern Dirt Track Association, LLC (SDTA), Marion County Speedway, Callahan Speedway, Crossroads Motorplex, Golden Isle Speedway, series sponsors and all persons, participants or organizations conducting or with this event for injury to property, or person I may suffer, including crippling injury, or death, while participating in the event and while upon event premises. I know the risks of danger to myself or child and my property while preparing for and participating in the event and while event premises. I rely upon my own judgement and ability, assume all such risks of loss and hereby agree to reimburse all costs to those persons or organizations connected with this event for damages incurred as a result of my negligence. I take full responsibility for my family, friends and pit crew.

RIDER and/OR Parent Release Sign here: \_\_\_\_\_ Date: \_\_\_\_\_