

Mini & Youth BIKES-\$25 per class

Name _____ Race # _____ Age _____

City _____ State _____ Brand _____

Transponder # _____

Mini Bikes:

- **-65cc 9-11** (ages 9-11).
- **-65cc 8-9** (ages 8-9)
- **-65cc 6-8** (ages 6-8)
- **-50cc 2-Stroke 6-8** (ages 6-8)
- **-50cc 2-Stroke 4-7** (ages 4-7)
- **-50cc 4-Stroke** (max age 8)
- **-Trail Rider** (max age 11, 65cc 2-str. Max, 110cc 4-str. Max)

*Minor release & emergency contact form on back

Youth Bikes:

- **-Super** (12-15, 112cc 2-str. Max, 150cc 4-str. Max)
- **-125 Super** (ages 12-15, 125cc 2-str. ONLY, * adult chassis)
- **-intermediate 14-15** (ages 14-15, 112cc 2-str. Max, 15cc 4-str. Max)
- **-intermediate 12-13** (ages 12-13, 112cc 2-str. Max, 15cc 4-str. Max)
- **-Junior 6-11** (ages 6-11, 112cc 2-str. Max, 150cc 4-str. Max)
- **-Girls** (age 8-15, 65cc 150cc, *youth sized only)
- **-65cc 8-11** (ages 8-11)
- **-65cc 6-8** (ages 6-8)
- **-Trail Rider** (ages 8-15, 235cc air cooled max, 150cc liquid cooled max, *youth sized bike only, *NO adult sized bike)

Minor Release and Waiver of Liability And Indemnity Agreement

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THE PARENT OR GUARDIAN HAS READ AND VOLUNTARILY SIGNS THE WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT AND DOES SO VOLUNTARILY AND WITH THE UNDERSTANDING THAT SUBSTANTIAL RIGHTS ARE BEING GIVEN UP. I/WE FURTHER ACKNOWLEDGE THAT FAILURE TO WITNESS OR NOTARIZE THIS AGREEMENT SHALL NOT AFFECT ITS VALIDITY.

1. I HAVE READ THIS RELEASE _____

☐ Father ☐ Mother ☐ Guardian
(Check One)

Date (mm/dd/yyyy)

I represent that I have sole legal custody or am the sole parent/guardian.
(Initial)

2. I HAVE READ THIS RELEASE _____

☐ Father ☐ Mother ☐ Guardian
(Check One)

Date (mm/dd/yyyy)

Printed Name of MINOR Participant: _____ D.O.B. _____

Address of Participant: _____

Printed Name of Parent or Guardian 1: _____

Printed Name of Parent or Guardian 2: _____

SEAL

(If Notarized) Subscribed and Sworn to at: _____ before me this ____ day of _____, 20____

Signature of Event Official or Notary Public

Printed Name of Event Official or Notary Public

County, State of _____ My Commission Expires _____

Minor Release & Waiver

Emergency Contact _____ **Phone #** _____

Participant Signature _____