

## Adult Bikes

Name \_\_\_\_\_ Race # \_\_\_\_\_ Age \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Brand \_\_\_\_\_

Transponder # \_\_\_\_\_

### Adult Bike Classes:

- ☐ -Pro (ages 16+) \$60
- ☐ -Pro AM (ages 16+) \$50
- ☐ -Junior A/B \$35
- ☐ -Vet A 30+ \$35
- ☐ -Open B 15+ \$35
- ☐ -School Boy 1 (ages 12-17) \$35
- ☐ -Vet B 30+ \$35
- ☐ -Open B/C \$35
- ☐ -250 C \$35
- ☐ -Open C 16+ \$35
- ☐ -Senior 35+ \$35
- ☐ -School Boy 2 (ages 12-17)
- ☐ -Vet C 30+ \$35
- ☐ -Senior 45+ \$35
- ☐ -Open C 25+ \$35
- ☐ -Golden Fox 55+ \$35
- ☐ -Women's \$35
- ☐ -4-Stroke \$35
- ☐ -Sportsman (non-points class) \$35
- ☐ -Buddy UP \$70 (ages 11+, 250cc minimum, non-points class, see rules for details)

\*\*Minor release & emergency contact form on back.

Buddy Name \_\_\_\_\_

Transponder # \_\_\_\_\_

## **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** \_\_\_\_\_