

REGISTRATION FORM

Event: _____ Date: _____

NAME: _____ DOB: _____ AGE: _____ SEVMX #: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____ MEDICAL INSURANCE PROVIDER: _____

Read This Release:

RELEASE: I hereby release and agree to hold SEVMX, the promoters, the owners and lessees of the premises, the representatives, Agents, and employees of all of them of and from liability, loss, claims and demands that may accrue from any loss, damage or Injury (including death, loss of limbs and permanent disablement) to my person or property, in any way resulting from or arising while Engaged in connection with this event, and whether arising while engaged in competition or practice or preparation therefore, or while Entering or departing from said premises, from any cause whatsoever. I know the risk and danger to myself and my property while upon said premises or while participating or assisting in the event, so voluntarily and in reliance upon my own judgement and ability, and I therefore assume all risk for loss, damage or injury (including death, loss of limbs and permanent disablement) to myself and my property from any cause whatsoever. I have no known PHYSICAL PROBLEMS that will endanger myself or others while participating in this event. **AGREEMENT:** By my signature below, I hereby agree to the terms of the above release.

Rider Signature: _____ Parent Signature: _____

Class Structure				
Youth	Brand	CC	Bike #	Fee
<i>50 cc age 4-6</i>				
<i>50 cc age 7-8</i>				
<i>Junior Mini age 7-8</i>				
<i>65 cc age 8-12</i>				
<i>85 cc age 11-15</i>				
<i>Super Mini age 12-16</i>				
<i>Youth Trail</i>				
<i>Schoolboy age 14-17</i>				
<i>Girls</i>				