

ROCKY MOUNTAIN MOTOCROSS SERIES

2012



Membership Form

Date:

Membership Fee: \$30.00

Name:

Age: DOB:

Street:

City:

State: Zip Code:

Phone:

E-mail:

Shirt/Jacket Size:

Bike #

Bike Size

Cycle Make

Rider Sponsors

LIABILITY RELEASE

I hereby give up all of my rights to sue or make claim whatsoever against the Rocky Mountain Motocross Series, its officers, promoters, sponsors and all other persons or organizations conducting or connected with any event for any injury to property or person I may suffer, including crippling injury or death, whether such injury occurs while I am preparing for or participating in the event, and while I am on the event premises. I know the risk of danger to myself and my property while preparing, participating in the event, and while I am on the event premises and relying on my own judgment and ability, assume all such risks of loss and hereby agree to reimburse all costs to those persons or organizations connected with any event for damages incurred as a result of any injury I cause or receive.

IF YOU ARE UNDER THE AGE OF 18, YOUR PARENT OR LEGAL GUARDIAN MUST SIGN BELOW.

Rider's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

Mail completed form & payment to:

RMX Series
PO Box 826
Kaysville UT 84037