2018 D34 SC Tri-State Trax Application

$30 for seasonal membership & card – If you want a replacement or spare card it is an extra $5 per additional card. Riders that race both bikes and quads and want a number held in each need to include an extra $5 to get both cards for both classifications ☺ Add $10.00 extra for custom card option and select that below!

PLEASE PRINT NEATLY!!!

Name: _____

Parents Name (if under 18 years old): _____

Date of Birth (mm/dd/yyyy): _____/_____/_____ Age:_____

Mailing Address: _____ Apt #:_____

City: _____ State: _____ Zip: _____

Phone: home (_____)_____-_____ cell (_____)_____-_____

Email:(PLEASE INCLUDE FOR LUCAS OIL LOYALTY PROGRAM)_____

AMA/ATVA #: _____

When is the last year you were a member of District 34? _____ What was your #? _____

Select rider class below:	
BIKE	**QUAD**
○ Youth	○ Youth
○ Novice	○ Novice
○ Amateur	○ Amateur
○ Expert	○ Expert
○ Women*	○ Women*
* (select skill level too)	
Number Preference (can have a letter after #)	1st: _____ 2nd: _____ 3rd: _____

In consideration of being granted a D34 SC Tri-State Trax Card and in consideration of being permitted to enter competition events sanctioned by the District 34 Sports Committee herein known as D34 SC Tri-State Trax, for myself, my heirs, personal representatives and assigns, herby release, discharge and agree to hold harmless and indemnify the D34 SC Tri-State Trax, promoters presenting sanctioned events, the owners and lessees of premises on which sanctioned events take place, the participants in sanctioned events, the owners, sponsors and manufacturers of all racing equipment upon the premises and the officers, directors, officials, representatives, agents and employees of all of them, of and from all liability, loss, claims, demands and possible causes of action that may otherwise accrue from any loss, damage or injury (including death) to my person or property, in any way resulting from or arising in connection with, or related to any sanctioned event and whether arising while engaged in competition or in practice or preparation therefore, or while upon entering or departing from said premises, from any cause whatsoever including, without limitation the failure of anyone to enforce rules and regulation, failure to make inspections or the negligence of other persons. I know the risk and danger to myself and property while upon said premises or while participating or assisting in a sanctioned event, and I do so voluntarily and in reliance, not upon the property, equipment, facilities and existing conditions furnished by others, but upon my own judgment and ability, and I thereby assume all risk for loss, damage or injury (including death) to myself and my property from any cause whatsoever and whether or not attributable to the negligence of others.

MEDICAL INSURANCE IS THE SOLE RESPONSIBILITY OF THE RIDER

Parents or guardian of any rider under the age of eighteen may withdraw their permission signed at the bottom of this form at any time upon returning to the D34 Tri-State Trax by return registered mail, the D34 Tri-State Trax card issued to said minor and upon notification of the withdrawal of such permission. I understand that a D34 Tri-State Trax card is subject to D34 Tri-State Trax and American Motorcycle Association rules for competition.

HAVE YOU READ THIS APPLICATION? YES OR NO _____

RIDER SIGNATURE: _____ **DATE:** _____/_____/_____

NOTICE: If Under 18 YEARS OF AGE, this application must bear the notarized signature of Parent or Guardian which shall acknowledge a waiver and release of any and all claims such Parent or Guardian may have.

Parent/Guardian Signature: _____

Subscribed and Sworn to before me this _____ day of _____, 20___

Notary Public: _____

SELECT CARD DESIGN TYPE:

☐ Standard Patriotic design   ☐ Presidential/Ronnie Mac Edition   ☐ Custom option (send picture via email + additional $10 fee)

Please mail to: **District 34 Sports Committee** (Please make check/money order payable to District 34 Sports Committee)
c/o Samantha Fritz
PO Box 9
West Milford, NJ 07480
973-208-2905
Email: D34mx@yahoo.com

*******WITH THIS APPLICATION PLEASE INCLUDE THE FOLLOWING*******
* A return address mailing label
*A copy of the rider's drivers license or birth certificate (if you have never done so in the past)