

# U.S.D.R. 2009 RACE ENTRY FORM

NAME \_\_\_\_\_ AGE \_\_\_\_\_ RIDER # \_\_\_\_\_ NEED NUMBERS?  YES  NO

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HM/CELL PH# \_\_\_\_\_ WK PH# \_\_\_\_\_ E-MAIL \_\_\_\_\_

D/L# \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_ (NEEDED FOR PAYOUT)

VEH MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ CC'S \_\_\_\_\_ YEAR \_\_\_\_\_ CLUB \_\_\_\_\_

SPONSORS \_\_\_\_\_

## ATTENTION

Racers who wish to compete in the expert or intermediate class Must have held an expert / intermediate or equivalent licence with a recognized organization within the last 5 years. Please send a copy of your licence along with your application.

## INDICATE YOUR RACE CLASS *(Check only one)*

Pro M/C _____ All Sizes	Pro _____
Open _____ 201cc & Up 2-Stroke / 251cc & Up 4-Stroke	Exp ___ Int ___ Nov ___ Beg ___
Lites _____ 0 To 200cc 2-Stroke / 0 To 250cc 4-Stroke	Exp ___ Int ___ Nov ___ Beg ___
Vet _____ 30 Yrs. To 39 Yrs All Bikes	Exp ___ Int ___ Nov ___ Beg ___
Senior 1 _____ 40 Yrs. To 49 Yrs. All Bikes	Exp ___ Int ___ Nov ___ Beg ___
Senior 2 _____ 50 Yrs. And Up All Bikes	Exp ___ Int _____
Women _____ All Bikes	Exp _____ Nov ___ Beg ___
Mini _____ 85cc 2-Stroke / 150cc 4-Stroke 11 To 15 Yrs.	Exp _____ Nov ___ Beg ___
Quads	
Open _____ All Sizes	Exp ___ Int _____ Beg ___
Kids	
Pee-Wee M/C _____ 0 to 50 cc 2-Stroke / 0 to 70 cc 4-Stroke, 0 to 10 Yrs.	ALL RUN _____
Kids 1 _____ 51cc to 65 cc 2-Stroke / 71cc to 111cc 4-Stroke 0 to 11 Yrs,	ALL RUN _____
Kids 2 _____ 66cc 85cc 2-Stroke / 0 150 cc 4-Stroke 0 to 12 Yrs.	ALL RUN _____
Pee-Wee Quad _____ 110cc Max 0 to 12 Yrs.	ALL RUN _____

## ENTRY FEES

PRO \_\_\_\_\_ \$100.00

### M/C - QUAD CLASSES

Pre-Entry \_\_\_\_\_ \$45.00

Race Weekend \_\_\_\_\_ \$50.00

### KIDS

Pre-Entry \_\_\_\_\_ \$20.00

Race Weekend \_\_\_\_\_ \$25.00

## PRE-ENTRIES MUST BE PAID IN ADVANCE

EVENT \_\_\_\_\_ DATE \_\_\_\_\_ LOCATION \_\_\_\_\_

PAYMENT METHOD: CHECK: \_\_\_\_\_ CASH \_\_\_\_\_ C/CARD # \_\_\_\_\_ EXP \_\_\_\_\_

## ENTRANT LIABILITY RELEASE AND ASSUMPTION OF RISK AGREEMENT

Entrant acknowledges the risk of injury to person, and potential damage to property resulting from participation in motorcycle / quadcycle racing events, and also acknowledges that such injury and damage can be caused by the negligent acts and omissions of persons, organizations, and companies connected with the conducting of such events. Entrant hereby assumes all risk of injury or damage resulting from participating in this racing event and releases U.S. Desert racing inc., Trac dynamics inc., Bureau of land management, sponsoring clubs and organizations, promoters, officials, land owners, companies, fellow participants and those acting in their support or on their behalf from any and all liability arising by a negligent act or omission or otherwise resulting in personal injury or damage to personal property, or injury to participants family or damage to their property. Entrant has a valid medical insurance policy which will pay for any medical expences arising from injuries suffered in this event. Entrant will not seek payment or reimbursement for expences incurred for medical services and treatment resulting from injuries suffered in this event from any of the persons or organizations listed above. I hereby consent to and authorize first aid and ambulance service as provided by the organizers of this event, and agree to hold all parties harmless from any consequences resulting from said aid and services.

## I HAVE READ THIS AGREEMENT AND I UNDERSTAND ITS TERMS

ENTRANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

(PARENTAL AUTHORIZATION FOR RACERS UNDER 18 YEARS OF AGE)

I, \_\_\_\_\_ being the parent or guardian of \_\_\_\_\_ do hereby authorize him/her To compete in this off road racing event, I also agree to hold harmless U.S. Desert Racing inc. The U.S. Government, and any and all Sponsors of any injuries, death, or property damage caused as a result of participating in this event.

PRINT NAME \_\_\_\_\_ SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

## OFF-ROAD RACING IS A DANGEROUS SPORT!

Fax entry to 661-295-1672 or mail to 28042 Ave. Stanford unit B Valencia, CA 91355 Phone: 661-478-2318