

\$20

RENEGADE RACING

\$20

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DOB: _____ PHONE: _____

EMAIL: _____

EMERGENCY CONTACT

NAME: _____

PHONE: _____

ENTRANT RELEASE AND ASSUMPTION OF RISK AGREEMENT

Entrant acknowledges the substantial risk of injury to person and property resulting from participating in this event and further acknowledges that such injury and damage can be caused by the negligent acts and omissions of persons and organizations connected with the conduct of such events.

Entrant hereby assumes all risk of injury or damage resulting from the participation in this event and releases Pioche, NV, Pioche Labor Day Committee, Pioche Grand Prix, sponsoring organization, promoters, officials, fellow participants, land owners 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 property damage to participant, participant's property, or participant's family.

Entrant has Medical insurance which will pay for any medical expenses arising from injuries suffered in this event. Entrant will not seek payment or reimbursement for expenses incurred for medical services and treatment resulting from injuries suffered in this event from any persons or organizations listed above.

I HAVE READ THIS AGREEMENT AND I UNDERSTAND ITS TERMS

Signature of

NAME: _____ DATE: _____

ENTRANT UNDER 18 YEARS OF AGE & HOLDING A NV PERMIT:

I, _____ being the parent or guardian of _____ do hereby authorize him/her to compete in this event, I also agree to hold harmless PIOCHE LABOR DAY COMMITTEE, PIOCHE GRAND PRIX, sponsoring organization and any and all Sponsors of injuries, death or property damage caused as a result of participating in this event.

Signature of Parent/Guardian:

_____ Date: _____