

# Youth / Pee Wee Registration Form

## Arizona Grand Prix OFFICIAL ENTRY FORM

Mail to: Race Arizona Grand Prix 515 E Carefree Hwy #702 Phoenix AZ 85085

**ENTRANTS UNDER AGE 18 (MINORS) MUST HAVE A PARENT OR LEGAL GUARDIAN NOTORIZED RELEASE TO ENTER RACE**

**MEMBERSHIP REQUIRED \$25.00**

Pee Wee Track

**MAIL PRE-ENTRY FORM MUST BE POST MARKED 10 DAYS BEFORE RACE**

\$25.00 Youth MAKE: \_\_\_\_\_  
 CC: \_\_\_\_\_  
 YEAR \_\_\_\_\_

**POST ENTRY FEES:** SIGN UP OPENS AT 05:30AM

1st NUMBER CHOICE:

\$35.00 Youth

2nd NUMBER CHOICE:

**INACCURATE OR INCOMPLETE ENTRY DATA ARE THE RIDERS RESPONSIBILITY AND MAY RESULT IN DISQUALIFICATION**

NAME: \_\_\_\_\_ Membership # \_\_\_\_\_ EXP. DATE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

PHONE: \_\_\_\_\_ E MAIL: \_\_\_\_\_

SPONSORS: \_\_\_\_\_

CHECK BOX FOR YOUR RACE:							
Please put an X in the appropriate box:				A	B	C	Class
Youth- Pee Wee Bikes	Saturday						
50cc 4-6 yr old							
50cc 7-8 yr old							
65cc (C)							
Youth - Pee Wee Quads	Sunday						
PW ATV 80cc (80cc - 90cc) (A,C)							
PW ATV 4-6 Pee Wees Ages 4-6, 50cc - 90cc							<b>TOTAL AMOUNT DUE:</b>

**ENTRANT RELEASE AND ASSUMPTION OF RISK AGREEMENT**

ENTRANT ACKNOWLEDGES THE SUBSTANTIAL RISK OF INJURY TO PERSON AND/OR PROPERTY RESULTING FROM FROM PARTICIPATION IN MOTORCYCLING OR QUAD EVENTS AND FURTHER ACKNOWLEDGES THAT SUCH INJURY CAN BE 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 PARTICIPATION IN THIS MOTORCYCLE/QUAD/UTV EVENT AND RELEASES FORT MCDOWELL YAVAPAI NATION, GRINDINGSTONE SPORTS PARK, FORT MCDOWELL YAVAPAI MATERIALS, SPONSORING CLUBS AND ORGANIZATIONS, MEMBERS AND OFFICERS, PROMOTERS, OFFICIALS, LANDOWNERS, VENDORS, SPONSORS, EQUIPMENT SUPPLIERS, FELLOW PARTICIPANTS, MEDICAL SERVICES, AND THOSE ACTING IN THEIR SUPPORT OR IN THEIR BEHALF FROM ANY AND ALL LIABILITY ARISING FROM NEGLIGENT ACT OR OMISSION OR OTHERWISE RESULTING IN PERSONAL INJURY PROPERTY DAMAGE OR DEATH TO PARTICIPANT, PARTICIPANTS PROPERTY OR PARTICIPANTS FAMILY. ENTRANT HAS MEDICAL INSURANCE WHICH WILL PAY FOR ANY MEDICAL EXPENSES ARISING FROM INJURIES SUFFERED IN THIS EVENT FROM ANY OF THE PERSONS OR ORGANIZATIONS LISTED ABOVE.

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

**MUST BE SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

I FURTHER UNDERSTAND THAT RACING IS A DANGEROUS SPORT AND I MAY BE SEVERLEY INJURED AND POSSIBLY KILLED. IT IS UNDERSTOOD AND AGREED THAT IN THE EVENT I AM INJURED OR KILLED FROM WHATSOEVER CAUSE DURING THE EVENT COVERED BY THIS APPLICATION, I HEREWITH CONSENT AND AUTHORIZE FIRST AID AND AMBULANCE SERVICE AS PROVIDED BY THE SPONSORING CLUB, ORGANIZATION, OR LAND OWNER AND FURTHER HOLD ALL PARTIES HARMLESS FROM ANY CONSEQUENCES OF SAID AID. I HEARBY AGREE TO CONFORM AND COMPLY TO THE RULES GOVERNING THIS CONTEST.

**MUST BE SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**A SEPARATE MINORS RELEASE IS REQUIRED BY ALL ENTRANTS UNDER THE AGE OF 18**

FOR OFFICIAL USE ONLY:			
TOTAL ENTRY FEE: \$ _____	CHECK # _____	YES <input type="checkbox"/>	COMP: YES <input type="checkbox"/>
CREDIT CARD INFORMATION:	VISA <input type="checkbox"/>	EXP <input type="checkbox"/>	
CARD # _____	_____	_____	_____