MAMA 2019 APPLICATION



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Please mail the application and fees to:	1
Middle Atlantic Motocross Association	
PO Box 143	10n
Chesapeake City, MD 21915	C'AU
For Questions, please call 443-669-3007	10,

Yearly Membership Fee Must Accompany This Application DO NOT SEND CASH IN THE MAIL

MAMA Member #_ Date Recieved __ Rider # Issued ___ Check No. Cash Y N Card Issued? Y N Referred by___

membership@mamamx.com	Reletted by	
Racer (Competition) Membership: \$40 Non Racer (Recreation) Membership: \$10		
2018 Riding Number 2019 Number Choice Check appropriate box: Adult Racer \$40 -those who are racing in 2019 New Youth Non Racer \$10 -those who are not racing but want to be a member of MAMA, no AMA membership required		
 AMA # _		
NAME _ _ _ _ _ _ _ _ _ _ _ _ _		
LAST	FIRST MI	
DATE OF BIRTH _ _ - _ - _ AGE _ _ SEX M F		
ADDRESS	_ APT _ _	
CITY _ _ STATE _ ZIP _ _		
PHONE - -		
EMAIL ADDRESS		
RELEASE, INDEMNITY AND ASSUMPTION OF RISK AGREEMENT Applicant acknowledges the substantial risk of injury to person and property arising from participation in motorcycling events 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. Applicant hereby assumes all risk of loss, damage or injury (including death) to applicant's person or property from any cause whatsoever, whether or not such cause is attributable to the negligence of others. Applicant hereby releases, discharges, and agrees to hold harmless and indemnify the American Motorcyclist Association, and the Middle Atlantic Motocross Association, sponsoring clubs and organizations, 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 applicant, applicant's property or applicant's family, while participating in motorcycling events or while upon, entering or departing from the premises upon which such motorcycling events are conducted. You MUST initial here to indicate that you have completely read this application and the MAMA/AMA RULES		
Upon completion of this application, payment of above fee for The Membership Card , and signing the waiver release, you will be eligible to race MAMA sanctioned events. With this card, you will be eligible to earn MAMA series points. I / We hereby make an oath and say that to the best of our knowledge and belief, all statements set forth in this application are true and correct.		
Date:		
Signature of Rider* □ Check here if you have sole custody of your child		
Signature of Mother /Guardian Signature of Father /Guardian		
Printed Name of Mother /Guardian Printed Name of Father /Guardian	AMERICAN MOTORCYCLISTASSOCIATION	