2021 Tri State Kart Club Membership Application

Membership period is from January 1, 2021 to December 31, 2021

Last Name:		First Name: _			M.I
Address:					
City:					
Birth Date:		Age:		Sex (M/F):	
Spouse F. Name:	P	rimary Health In	surer:	w. # # # # # # # # # # # # # # # # # # #	
TSKC Member Since:					
Home Phone: ()					
Cell Phone: ()		E-Ma			
Pit Spot Renewal #	\$100.00 (upper pit spot)	#	\$250.00	(Lower pit spot)
Receive Club Notifications [E-Mail				Posta
<u>A</u>	ADDITIONAL RA	ACING FAMIL	Y MEMBI	ERS	
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Master member's children less					ess than 18 years o
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Make checks payable to T.S.K.C Bring this form with payment to any club race, meeting or Mail to: Tri State Kart Club, P.O. Box 247, Pomfret, CT 06259

	Do not complete - for Tri-State Kart Club use only.					
Payment Amount:	Check No.:	_ Date Rec'd:	TSKC #:	_ Pit Spot#		

The undersigned hereby agrees that all family members will adhere to and abide by all rules and regulations of the Tri-State Kart Club and WKA. In addition, it is the club member's responsibility to complete the required insurance releases and waivers at each race meeting.

TRI STATE KART CLUB RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

The undersigned, by signing this agreement, accepts full responsibility and liability while utilizing Pomfret Speedway, collectively referred to herein as the "Facilities". This includes the tracks as well as the grounds around and including the track which consists of the parking areas, concessions, walkways, spectator areas and the pit area. This Release, Waiver and Assumption of Risk and Indemnity agreement is good for the membership year in which this document is signed and is also intended to cover Family Members set forth above ("Family Members").

The undersigned acknowledges that the Facilities are designed for racing motorized karts. Kart riding and racing is a sport with an inherent risk of bodily injury and/or death and property damage and the undersigned acknowledges this and accepts full responsibility and assumes all risk of bodily injury, death or property damage for themselves and Family Members in this regard.

The undersigned covenants to hold harmless and not to sue or bring legal proceedings against the Tri State Kart Club, its officers, trustees, members, sponsors, employees, track officials, heirs and assigns as a result of any injury, personal property damage or death incurred while at and/or using the Facility. By signing this agreement you acknowledge that you have inspected the Facility and are aware of the complete course layout and have determined of your own free will that it is safe and that you have the skills necessary to ride on the Facilities. You also acknowledge that you have determined that any hazards present in other areas of the Facilities are known to you and all persons under your care or guidance, which includes Family Members. In the event that you bring legal proceeding against the Tri State Kart Club, its officers, trustees, members, sponsors, employees, track officials, heirs and assigns, you agree to pay for all such legal expenses and costs as incurred by the parties aforementioned that arise or are a consequence of said legal proceeding.

This waiver is the for the current use season and is in addition to any other release and waiver of liability, assumption of risk and indemnity agreement that I may sign. It will need to be resigned on an annual basis. I understand that this document will be kept on file for the entire season. Upon each day of riding at the Facility, a signature sheet will be signed acknowledging that the rider(s) have completed and continue to agree to this waiver document.

I am 18 years of age or older have read and understand the terms of this agreement understand that i am giving up substantial rights by signing this agreement, have signed it voluntarily and without any inducement or assurance of any nature, oral or written, and intend this agreement to be a complete and unconditional release of all liability to the greatest extent allowed by law. I agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Signature:	Date:	