







Kidder Rd. P.O. Box 273 Bradford, Vt. 05033 (T) 802/222-4052 Fax 603/787-2490 www.bearridgespeedway.com

2017 BRS Car Owner/Driver Application

USE THIS APPLICATION TO REGISTER A RACE CAR & IT'S OWNER and/or DRIVER (if different) AND CAR NUMBER, NOT FOR MEMBERS. This form may be photo copied.

MEMBERSHIP FEE - \$50.00

AFTER March 1ST \$75.00

MAIL COMPLETED FORMS TO: BEAR RIDGE SPEEDWAY P.O. Box 273 Bradford, Vt. 05033

THIS FORM MUST BE FILLED OUT IN FULL CAR NUMBER AND DIVISION MUST BE COMPLETED!!				
Car #	Division		BRS License#	Date
CAR OWNER FULL NAME		SSN or TIN		
DRIVER FULL NA	ME (if different than d	owner)		
EMAIL ADDRESS:				
ADDRESS				
			ZIP CODE_	
PHONE		Date of Birth	Place of Birt	th
(If) driver, driver lice	nse # & state			
Employed by:			phone	
Address		City	State	Zip Code
Emergency contact	Relation		Phone	
Do you have any han-	dicaps or disabilities?	Yes No If yes,	, describe on back of the	is form & sign.
Date of last physical examPhysical Condition				
Do you currently have health insurance? Yes No If yes, Name of Insurance Company/Plan				
Agent	Phone	Address		
APPLICATION AND PAYMED 2017 rules for BRS. DRIVER APOINT FUND MONEYS, TRO ADVERTISING RELEASE: The	NT MUST BE RECEIVED BY M. AND/OR OWNER MUST PURCH PHIES, AND CONTINGENCY II e undersigned consents to the use	ARCH 1, 201. By signing this IASE A TICKET AND BE PRIEMS. of his/her name and/or pictures	ESENT AT ANNUAL AWARDS of him/herself and his/her car, for	ceived and read and understand the BANQUET TO RECEIVE ANY

SAFETY RELEASE: I hereby give up all my rights to sue or make any claim against the BEAR RIDGE SPEEDWAY and their organizers, promoters, sponsors and all other persons or organizations conducting or connected with this event for any injury to property or person I may suffer, including crippling injury or death, whether

other persons or organizations conducting or connected with this event for any injury to property or person I may suffer, including crippling injury or death, whether such injury arises while I am preparing for or participating in the event or while I am upon the event premises.

I know the risks of danger to myself and my property while participating in the event, and while upon the event premises and relying upon my own judgment and

I know the risks of danger to myself and my property while participating in the event, and while upon the event premises and relying upon my own judgment and ability, assume all such risks of loss and hereby agree to reimburse all cost to those persons or organizations connected with this event for damages incurred as a result of any injury that I cause or receive.

ARBITRATION: Any dispute, controversy or claim involving the undersigned member, whether or not relating to this agreement or alleged breach of same, shall be settled in accordance with the existing and/or amended rules and regulations of the Speedway and the undersigned agrees to accept the decision rendered in the process. I understand there will be no refund of membership fees once paid for any reason.

Date_____Legal Signature_