



PO BOX 880, 6000 Hwy 3, HAYFORK, CA 96041 (530)628-5223

HALLOWEEN ENDURO RACE REGISTRATION

DRIVER NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____

ZIP: _____ PHONE #: _____ EMAIL: _____

BIRTHDATE: _____ SSN: (for cash payout) _____

Age Verification Document Type: _____

Minor (16-17) Parent Signature of Consent: _____

Emergency Contact Information: _____

Emergency Contact Phone #: _____

\$25 Car \$25 Driver \$20 Pit Pass (per person, must be 16 or older)

VEHICLE INFORMATION

Year: _____ Make: _____ Model: _____

Number: _____ Color(s): _____

Owner Name (if different from driver): _____

Owner Phone #: _____

Sponsors:

Signature

Date

I, _____ hereby grant Trinity County Fair Association and its legal representatives the irrevocable right and unrestricted permission to use and publish photos or video of me, or in which I may be included, for any purpose authorized by TCFA, including but not limited to website use, editorial publications, catalogs and advertising use. I understand that the circulation of such materials could be county, state or worldwide and that there will be no compensation to me for this use. Furthermore, I understand that I will not be given the opportunity to inspect or approve the finished product or the advertising copy or the printed material that may be used in connection therewith. In granting this permission to TCFA and its legal representatives, I am fully and without limitation, releasing them from any liability that may arise from the use of the images. I further agree to the inclusion of my name.

Initials _____

I understand that Trinity County Fair Association has adopted a ZERO TOLERANCE Policy for alcohol in the pit and/or racetrack areas. I also understand that I may be ejected from the event and premises for a first offense and prohibited from the premises for the remainder of the year and/or season for a second offense. I am aware that my pit space, vehicle(s), ice chests, and other personal property are subject to search at any time by TCFA staff and or Race Volunteers.

Initials _____

I have completed the Registration Form, read and signed the Release of Liability Waiver, and acknowledged the Photo Waiver, ZERO TOLERANCE Policy, and Release Form. I have been made aware that the Pit Rules are posted. I agree to abide by these rules or face immediate removal from the fairgrounds and/or race premises.

Signature

Date