# 2024 AMA DISTRICT 7 MEMBERSHIP APPLICATION

☐ ***Dirt Track $ 30*** ☐ ***Recreation Membership: $10***

**Check appropriate box:**

☐ Adult ☐ Youth ☐ New ☐ Renewal - Year Joined _____

**AMA # |__|__|__|__|__|__|__| EXPIRATION DATE|__|__/__|__|# OF YEARS AMA MEMBER|__|__|**

**NAME|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__| |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__| |__|**

**LAST FIRST MI**

**DATE OF BIRTH|__|__|-|__|__|-|__|__|__|__| AGE|__|__| SEX M F**

**ADDRESS|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__| APT|__|__|__|__|**

**CITY|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__| STATE|__|__| ZIP|__|__|__|__|__|**

**PHONE|__|__|__|-|__|__|__| - |__|__|__|__| CELL 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, AMA District 7, sponsoring clubs and organizations, board members, directors, 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 _____**

Upon completion of this application, payment of above fee for **The Membership Card**, and signing the waiver release, you will be eligible to participate in AMA District 7 sanctioned events. 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

**Bring completed form and application fee to the track or mail to the following address (DO NOT SEND CASH IN THE MAIL).**
**Checks to be made out to AMA District 7.**
**5677 Ridge Road, Mount Airy MD 21771**

Date Received _____

Rider # Issued _____

Check No._____

Card or Cash Y N

Card Issued? Y N

Referred by_____