



# Transponder Deposit

Office Use Only

Deposit CASH

Deposit CREDIT

Transponder #

Clips

Own clip

Rider Name

Rider Bike #:

Cell Phone:

Billing Zip Code:

I acknowledge acceptance of the following terms and conditions for rental of transponder(s). I accept and agree to all charges in the event that I fail to return the assigned transponder(s) at the end of each event. **I agree to waive any charge back rights, my signature allows Rocky Mountain Motocross Series LLC and its agent's the authorization to charge my credit card a standard rate of One Hundred dollars (\$100.00)**

Credit Card #

Exp Date

CVV:

Cardholder Name (print)

Cardholder Signature



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