



**I ACKNOWLEDGE THE FOLLOWING CONDITIONS
FOR MYSELF AND / OR MY MINOR CHILD**

(Please INITIAL each Line below)

Everyone Must Sign and Initial

PLEASE FILL OUT NEATLY

- _____ I have read, understand & signed the waiver release form.
- _____ I understand & agree that I will not sue as a result of anything that happens at Raceway Park.
- _____ I understand that I can get seriously injured or killed participating here at Raceway Park.
- _____ I understand that there are other riders that I can run into or can run into me resulting in injury or death.
- _____ I understand that the track changes constantly, ruts, bumps, puddles and mud form without warning.
- _____ I understand that the track designers change parts and / or entire sections of this track day to day.
- _____ I understand the track is watered w/o warning by in-ground sprinklers, water trucks and hoses.
- _____ I understand that the watering may make sections of the track slippery and/or muddy.
- _____ I understand that there may be moving of equipment out on the track & infield at any time without warning.
- _____ I understand that having course workers on the track does not eliminate the dangers of motocross riding.
- _____ I understand that there is ABSOLUTLY NO riding in the Pits.
- _____ If I see or experience any unsafe or unacceptable conditions I will safely stop riding and leave the track area and notify an official ASAP.
- _____ I understand that I MUST be seen by a Raceway Park EMT in the event of an injury.
- _____ I understand and accept I could ride with riders of other skill levels.
- _____ I have read and understand and accept all the conditions stated above.

RIDER PRINT NAME

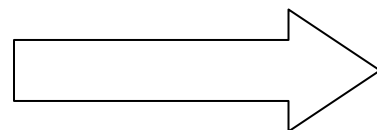
RIDER SIGNATURE

DATE

*PARENT/GUARDIAN PRINT NAME
*(If applicable)

*PARENT/GUARDIAN SIGNATURE

PLEASE TURN OVER



**MUST BE FILLED OUT COMPLETELY AND CLEARLY
PLEASE PRINT!**

Rider Name _____

Parents Name _____

(If under the age of 18)

Guardian Name _____

(If Applicable & with proper notarized paper work)

Street _____ Apt _____

City _____ State _____ Zip Code _____

Phone Number _____

E-Mail _____

Rider D.O.B _____ Rider Age _____