

Evansville Practice Club

Club Application Form

In consideration of being allowed to participate in motocross/supercross events, and/or any related events and activities, sponsored by Evansville Practice Club, Evansville Motocross, LLC, Evansville Supercross Park, LLC, and intending to be legally bound, the undersigned:

1. Agree that, prior to participating, they each will inspect the facilities and equipment to be used, and if they believe anything is unsafe, they will refuse to participate.
2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions or negligence of others, the rules of play/participation, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
4. Release, waive, discharge and covenant not to sue Evansville Practice Club, Evansville Motocross Park, LLC, Evansville Supercross Park, LLC, its affiliated entities, and/or clubs, their respective administrators, directors, agents, members, owners, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event, all of whom are hereinafter referred to as "releasees," from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or part by negligence of the releasee or otherwise.

THE UNDERSIGNED HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

Must provide Identification along with club card to Practice

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Signature: _____ Date: _____

Club Name: Evansville Practice Club /Evansville Motocross Park, LLC / Evansville Supercross Park, LLC

Please complete and Notarize bottom portion if under 18 yr.

Age-if **under 18** years of age a notarized permission slip is required upon joining **-NO EXCEPTIONS-**

This document acknowledged before me on _____

Name of Minor: _____ Parent /Guardian Signature: _____

Signature of Notary Officer _____

Notary Public for the State of _____

My commission expires on _____