

## RACER5 RELEASE OF LIABILITY/ LIABILITY WAIVER FORM

By signing below, I	, of sane mind and able body,
acknowledge that all activities sponsored or conduction accident, loss, damage, or injury ranging from but	cted by Racer5 are likely to be extremely hazardous and may result it not limited to broken bones, paralysis or even death. Such events dangerous conditions, weather conditions and but not limited to
my family and heirs to RELEASE Racer5 and any oriders and owners of any equipment or property on	g to be legally bound, I hereby agree for myself and on behalf of of its representatives, agents, directors, officers, members, fellow which Racer5 was conducting its events from any and all liability TO SUE OR OTHERWISE make ANY claims against Racer5 or dicipation in any activities conducted by Racer5.
FROM NEGLIGENCE of Racer5. I understand that careful person would do, or the doing of an act which similar circumstances to protect him or herself, or or	e whether or not any loss, damage, injury, or death RESULTS negligence means a failure to do an act which a reasonably ch a reasonably careful person would not do, under the same or others, from accident, injury or death. I understand that there are no s, or coaches. I will follow the advice of amateur coaches, spotters, sk.
being while participating in the activities sponsored making my own assessment as to whether it is safe insurance coverage for events conducted by Racer Racer5 and its members that I will be responsible for	and to take every precaution to provide for my own safety and well- or conducted by Racer5, including inspecting all equipment and e and free from all defects. I further understand that there is no 5 or any of the equipment or property. I have represented to or any damage to equipment or property that belongs to me. I bills will be submitted to my own insurance company or will be my
	e motorcycles and equipment, located on any given track at any behalf by other members of Racer5 and its members. This
Name	Signature
Emergency Contact	
Emergency Contact's Address Contact	
Emergency Contact's Phone Number Contact	Date
IF ANY PARTICIPANT IS UNDER 18, A PAR	ENT OR GUARDIAN MUST READ AND SIGN BELOW.
and WAIVER. I hereby consent to the terms st	rticipant and have read the above application and RELEASE tated above and RELEASE AND WAIVER on behalf of the to the participation of the above named minor in all
Signature	Date
Name of Parent or Legal Guardian	