



Lynnville Area Dirt Riders, Inc.

PO Box 441

Chandler, IN 47610

Web site: www.ladirriders.com

e-mail: info@ladirriders.com

MEMBERSHIP APPLICATION

First: _____ Last: _____

Street: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

AMA #: _____ AMA Exp Date: _____

Shirt Size: _____

THIS IS A RELEASE AND INDEMNITY AGREEMENT READ IN FULL BEFORE SIGNING

I hereby give up all rights to sue or make any claim for damages due to negligence or any other reasons whatsoever against the Lynnville Area Dirt Riders, sponsors, promoters and all other persons or organizations conducting or connected with any L.A. Dirt Riders activity and/or function for injury to property or persons I may suffer, including but not limited to: crippling injury or even death, while participation in any such activities or club events or on any event premises.

I know and understand the risk and dangers to myself and my property while participating at any of the club activities, functions and/or work days, and relying upon my own judgment and abilities, do assume all such risks of my own free will and hereby agree to reimburse all cost to those persons/ organizations connected with the L.A. Dirt Riders for any such damages incurred as a result of my negligence.

BY SIGNING THIS RELEASE I DO HEARBY AGREE TO THE INDEMNITY AGREEMENT AND RELEASE ALL RIGHTS.

THIS IS A RELEASE- _____ **Date** _____
SIGNATURE OF CLUB MEMBER (REQUIRED)

VERIFYING OFFICIAL- _____
SIGNATURE OF CLUB PRESIDENT (OR VICE PRESIDENT IN CASE OF PRESIDENTS ABSENCE)

Members Only Section: (Must be signed by 2 active club members to be official)

Recommended By: _____ Recommended By: _____
(Upon affixing my signature to this document I attest that the above applicant will be a good, working & active member)

Administrative Section: (Must be completed by club secretary only)

Received by club secretary: _____ Voted IN: YES / NO _____

Club Secretary Signature: _____ Date: _____
(Valid & Official only when signed)