



2017 Southeast Regional Cross Country Series Entry Form

AHRMA Membership # _____ Bike # _____ Event Name: _____

Name: _____ Address: _____

City, State, ZIP Code: _____

Phone: _____ Mobile Phone: _____ Email: _____

Personal Medical Insurance Company & Policy #: _____

Sponsors: _____

READ THIS RELEASE

RELEASE: I hereby release and agree to hold harmless AHRMA, the promoters, the owners and lessees of the premises, the participants, sponsors, and the officers, directors, officials, representatives, agents and employees of all of them of and from all liability, loss, claims and demands that may accrue from any loss, damage or injury (including death, loss of limbs and permanent disablement) to my person or property, in any way resulting from, or arising in connection with this event, and whether arising while engaged in competition or in practice or preparation therefore, or while upon, entering or departing from said premises, from any cause whatsoever. I know the risk and danger to myself and property while upon said premises or while participating or assisting in the event, so voluntarily and in reliance, upon my own judgment and ability, and I thereby assume all risk for loss, damage or injury (including death, loss of limbs and permanent disablement) to myself and my property from any cause whatsoever.

I have no known PHYSICAL PROBLEMS that will endanger me or others while participating in this event.

My helmet meets all standards as specified in the current AHRMA Handbook.

AGREEMENT: By my signature below, I hereby agree to the terms of the above release, guarantee credit card payment and further agree to abide by the AHRMA Handbook and any special regulations during the event.

(RIDER SIGNATURE)

Event information: www.ahrma.org

AHRMA Membership information:

ccowell@ahrma.org or 910.253.9738

Refer to the current AHRMA Handbook (Also available online at www.ahrma.org) for questions regarding classes and eligibility. See Section 17 for Rules & Eligibility committee personnel and other Officials.

Class	Model Year	Machine Brand/Chassis	Engine Size (cc)	Skill Level	Entry Fee
Premier					
Classic					
100cc					
Sportsman 200					
Sportsman Open					
Vintage 50+					
Vintage 60+					
Vintage 70+					
Vintage Women					
Historic 200					
Historic Open					
Post Vintage 200					
Post Vintage Open					
Post Vintage 50+					
Post Vintage 60+					
Post Vintage 70+					
Post Vintage Women					
Pre-Modern					
AHRMA Membership (if due, \$75; International, see membership form)					
Benevolent Fund or Individual Donation to AHRMA					
TOTAL FEES					

MC/Visa/Disc/AmEx _____ Exp. Date _____

Street # _____ ZIP Code _____