



# 2018 AHRMA Regional Trials Series Entry Form

AHRMA Membership # \_\_\_\_\_ Date \_\_\_\_\_ Event Name/Date: \_\_\_\_\_

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.

Class	Model Year	Machine Brand/Chassis	Engine Size (cc)	Skill Level	Entry Fee
Modern Classic					
Classic					
Premier Lightweight					
Premier Heavyweight					
Rigid Lightweight					
Rigid Heavyweight					
Girder Fork					
Beginner					
Support Class					
AHRMA Membership (if due, \$75; International, see membership form)					
Benevolent Fund or Individual Donation to AHRMA					
<b>TOTAL FEES</b>					

**National Event information:** [www.ahrma.org](http://www.ahrma.org)

**AHRMA Membership information:** [ccowell@ahrma.org](mailto:ccowell@ahrma.org) or 910.253.9738

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(RIDER SIGNATURE)

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