

CLASS	AHSCS MEMBER	CLASS NUMBER
	YES <u>or</u> NO	



## ARKANSAS HARE SCRAMBLE CHAMPIONSHIP SERIES RELEASE

The undersigned (or their guardian) fully understands the hazards and dangers of racing and assumes full responsibility for bodily injury, property damage or DEATH even if due to the negligence of anyone involved. All riders and crew must abide by track rules and participate at their own risk. By signing this release I agree (or guardian agrees) to hold harmless and indemnify the promoter of this race and any volunteers or landowners. I also agree to become an AHSCS member for this race only if I am not currently a series member. A one day membership does not afford me any series points.

\_\_\_\_\_  
Rider Signature: \_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature (if under 18) \_\_\_\_\_  
Date

***Print information below clearly. Name is entered into computer program from this sheet!***

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone (area code/number)

\_\_\_\_\_  
Date of birth \_\_\_\_\_  
Bike Brand \_\_\_\_\_  
Year/Model

\_\_\_\_\_  
Emergency Contact \_\_\_\_\_  
Contact Phone Number