



# 2017 TQRA Membership Form

## INDIVIDUAL MEMBERSHIP

Name		D.O.B	
Address		Quad Type	
		Race #	
Phone		DL #	
Email		Shirt Size	
Race Class			
1		Sponsors:	
2			
3			

## ADDITIONAL MEMBERSHIP / FAMILY INFORMATION

Name		D.O.B	
Address		Quad Type	
		Race #	
Phone		DL #	
Email		Shirt Size	
Race Class			
1		Sponsors:	
2			
3			

***Complete additional family membership information as needed and attach.***

**Family discount only applies for immediate family. Parents and Siblings (no cousins, aunts, uncles, etc.). Members must reside at same address.**



**Each Member must read and sign below:**

I understand the risks of injury, and assume all risks, involved with participation in the Texhoma Quad Racing Association (TQRA) in which I voluntarily participate. I hereby irrevocably and forever release, discharge, indemnify and hold harmless the organizers, sponsors and promoters of the Texhoma Quad Racing Association, the track/facility and all persons related thereto from any and all claims, liabilities, demands, and causes of action of every and any kind, nature or description to which I may be otherwise entitled because acknowledgement and release is binding upon myself, and my heirs, executors, agents, and assigns. This can be an at risk sport thus TQRA and/or the Track owner does not carry any insurance to cover anyone for such risks. I promise to promote good sportsmanship at all TQRA events and am responsible for the sportsmanship of any guest that I may bring to an event.

**By signing this document I acknowledge and agree to the above statements. I also have read and understand the 2017 TQRA rules and agree to abide by them.**

***Note: Anyone racing in an age-restricted class MUST be able to produce a copy of their birth certificate or driver license at each event.***

**I have read the above release and agree to its terms.**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Participant)*

Adult Name : \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(If Minor Participant. Must be Legal Guardian. Legal guardian must be present during events)*

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Participant)*

Adult Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(If Minor Participant. Must be Legal Guardian. Legal guardian must be present during events)*

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*(Participant)*

Adult Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

2017 TQRA Fee Schedule		
Single Event Membership	\$10	Note: Family discount only applies for immediate family. Parents and Siblings. Members must reside at same address.
1 Yearly Membership	\$50	
2 Family Yearly Membership	\$90	
3 Family Yearly Membership	\$120	
4+ Family Yearly Membership	\$140 (\$35 each)	