



# APPLICATION for COMPETITION LICENSE

**License Fee: \$50.00**  
(check payable to AMX)

REQUESTED NUMBER	
First choice _____	Second choice _____
AMX Number assigned _____	

**Please print clearly**

Name \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_

Address \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Current rider skill level: Beginner \_\_\_\_ Novice \_\_\_\_ Intermediate \_\_\_\_ Pro \_\_\_\_

Current motorcycle size: 50cc \_\_\_\_ 65cc \_\_\_\_ 85cc \_\_\_\_ 100cc \_\_\_\_ 125cc \_\_\_\_ 250cc \_\_\_\_  
other \_\_\_\_\_

Age group class: 50 0-6 \_\_\_\_ 50 7-8 \_\_\_\_ 60 0-8 \_\_\_\_ 60 9-11 \_\_\_\_ 80 7-11 \_\_\_\_ 80 12-13 \_\_\_\_  
80 14-16 \_\_\_\_ 25+ \_\_\_\_ 30+ \_\_\_\_ 40+ \_\_\_\_

Current class(s) you usually ride \_\_\_\_\_

### RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

**I FULLY UNDERSTAND THAT MOTORCYCLE RACING IS HIGHLY DANGEROUS**  
**I FULLY UNDERSTAND THAT THERE IS NO RIDER MEDICAL INSURANCE PROVIDED**

The undersigned hereby releases, waives, discharges and covenants not to sue the promoters, participants, racing associations, sanctioning organizations and any subdivision thereof, track operators, officials, vehicle owners, drivers, pit crews, rescue personnel, any person in any restricted area, sponsors, advertisers, owners and lessees of premises used to conduct the EVENT(S), premises and event inspectors, surveyors, underwriters, consultants and others who give recommendations, directors, or instructions or engage in risk evaluation or loss control activities regarding premises or EVENT(S) and each of them, their directors, officers, agents, and employees, all for the purposes herein referred to as "RELEASEES", from all LIABILITY TO THE UNDERSIGNED, his personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE AND ANY CLAIM OR DEMANDS THEREFOR ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENT(S), WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. **The UNDERSIGNED hereby ASSUMES FULL RESPONSIBILITY FOR THE RISK OF BODILY INJURY, DEATH, or PROPERTY DAMAGE** arising out of or related to the EVENT(S) whether caused by the NEGLIGENCE OF THE RELEASEES or otherwise. I have read this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement, fully understand it's terms, understand that I have given up substantial rights by signing it and have signed it voluntarily without any inducement, assurance, or guarantee being made to me and extend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law. (If participant is under age 21, this form must be signed by his/her parent or Legal Guardian.)

Mail check or money order and application to:  
AMX  
P.O. Box 2519  
Cottonwood, AZ  
86326

**YES, I HAVE READ THIS RELEASE**

\_\_\_\_\_  
Rider's signature

\_\_\_\_\_  
Parent or Legal Guardian's Signature

Date \_\_\_\_\_  
Month Day Year



Arizona's own motocross sanctioning body

Racing for Arizona's racers