



Date received (office use only): _____

OREGON MOTORCYCLE ROAD RACING ASSOCIATION 2018 Volunteer Membership Application

1. PERSONAL INFORMATION:

Name:	Phone: ()
Address:	Email:
City, State, Zip:	Date of Birth:

2. Volunteer license info: Volunteers will be getting complementary licenses that begin with the number 1000 for the 2018 season. Please pick your preferred number (examples are 1002, 1021, etc.). Numbers will be given out in the order they are received.

2018 number preferences: 1st _____ 2nd _____ 3rd _____ (otherwise lowest available)

3. T-shirt:

- **OMRRA Volunteer T-Shirt** Please write size needed _____
Tshirts will be distributed at a volunteer meeting

4. LIABILITY RELEASE (read entirely, then sign):

In consideration of the granting to me of active volunteer status by the *Oregon Motorcycle Road Racing Association (OMRRA)*; and in consideration of promotion and operation for my benefit of road race events by *OMRRA*; and in consideration of granting of permission to me to enter, use and remain on track facilities and/or premises at which these events take place by the owners and/or representatives thereof, I hereby, for myself, my heirs, personal representatives and assigns, release, discharge and agree to hold harmless and indemnify *OMRRA*, the owners and/or representatives of the aforesaid track facilities and/or premises, as well as the directors, officers, agents, employees, and/or members of all of them, of and from all liability, loss, claims, demands, and possible causes of action that might otherwise accrue from loss, damage or injury (including death) to my person or property, in any way resulting from, or arising in connection with, or related to any event, and whether arising while engaged in volunteer activities in support of competition or in practice or in preparation thereof, or while upon, entering or departing from said track facilities and/or premises, from any cause whatsoever, including, without limitation, the failure of anyone to enforce rules and regulations, failure to make inspections, or the negligence of other persons. I understand motorcycle racing competition can constitute a hazardous activity and that, by reason of my application for *OMRRA* active volunteer status and/or my participation in or presence at any competition event, I assume all hazards and risks relating thereto. I also agree that *OMRRA* may use my pictures and my name (including pictures taken at any event) for any purpose in any media. I also agree to abide by *OMRRA* competition rules at the events to which they apply and to respect the authority of race officials at all events. I have read this application in its entirety and stipulate, under penalty of perjury, that all statistical information set forth herein by my signature is true and complete.

I have read this release. Initial here (required) (____).

I hereby confirm, consent and agree to the foregoing.

Signature of applicant (required) Date

Volunteers may only sign the above liability release if they are at least 18 years old. If the Volunteer is under 18 years of age, notarized parental signature(s) are required. See page 2.

Office Fax: 1- (503) 868-6000

Office Phone: (503) 841-6185

Email: info@omrra.com

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