## UNITED STATES ADVENTURE RACING ASSOCIATION



## **USARA MEMBERSHIP APPLICATION**

NAME		AGE	
ADDRESS		GENDER	
CITY	STATE	ZIP	
PHONE ()	E-MAIL		
	MENT OF RISK, RELEASE ( DEMNIFICATION AGREEN		
	signed Applicant for the benefit of United States and associations, employees, agents, members, s		
behalf of my heirs, executors, administrate indemnify, including as to attorney fees, a expenses or demands arising directly or in Releasees in connection with the sponsors and from such event, in which I may partiprovision in this agreement is intended to affect the other terms and provisions, which	membership in and the issuance of a license to a lors, legal representatives, successors and assigns and promise not to sue Releasees on, from or again directly from or attributable in any way to the neship, organization or execution of any adventure cipate as a racer, rider, team member, spectator be severable. If any one or more of them is four ch shall remain binding and enforceable.	s, release and forever discharge, hold harmless, inst, and waive, any claims, damages, egligence, action or failure to act of any racing or sporting event, including travel to or in any other manner. Every term and d to be unenforceable or invalid, that shall not	
	PRINTED NAME OF	FAPPLICANT	
XSignature of Applicant (All appli	Date:		
FOR MINORS:	,		
PARENT OR GUARDIAN MU	ST COMPLETE THE FOLLOWIN	<b>IG</b>	
permission for my child or ward to enter	represent to the Releasees that the facts herein or any adventure race or event permitted by USAR sideration of the granting of such license, agree, t.	A, Inc., or its associations during the period of	
	PRINTED NAME OF	PARENT OR GUARDIAN	
Signature of Parent or	Guardian		

1 year USARA Racing License with a subscription to Adventure World Magazine \$35.00