



Annual Quick Pass Program

The annual Quick Pass program allows annual Rider Network members to enjoy the benefit of signing one waiver for the entire year for all Rider Network events at all Rider Network Locations.

Here are rules needing to be followed when using the Quick Pass waiver program. Please make sure all signup staff understands this document before signing members up.

- Application **MUST** be signed by the rider, both parents (minor waiver only. One parent only if they can prove sole custody) and Notary Republic if signed off site. Notary seal or stamp must be on the application before being accepted. It's highly advised someone from each Rider Network location / promotion become a authorized Notary Republic for the sake of witnessing waiver signatures as a registered official.
- Applicant must provide a proof of photo ID along with quick pass membership card to verify their identity. No minor without photo ID can use the quick pass system unless quick pass card has a photo of the member on it.
- Waivers can be put on websites; however they must be printed in color in order to be accepted at the gate.
- Riders who already have a regular Rider Network card can hand in their card to location officials and receive a Quick Pass card for \$2. Please make sure that rider cards accompany the quick pass application when sent in with batches.
- Quick Pass cards will be indicated with Quick Pass wording and colored indication bar on the top of the Rider Network section.

This Quick Pass program should save many hours of hassle when members pass through the gate, and allow staff to carry a few less pads of paper when working the gate.



ANNUAL QUICK PASS APPLICATION & WAIVER

Welcome to the Rider Network! Please fill in the information fully, read over our waiver and sign the document at the bottom. Your Rider Network card will be processed in the order they are received. Please allow a few weeks for processing of your benefit card and account. Once the card is sent it will be active with your information so you can start saving time and money right away!

Name:	Date of Birth:	
Address:	County:	
City:	State:	Zip:
Phone:	Email:	

ANNUAL RIDER NETWORK RELEASE AND WAIVER OF LIABILITY

ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

APPLIES TO ALL RIDER NETWORK LOCATIONS AND EVENTS DURING ACTIVE YEARLY MEMBERSHIP

IN CONSIDERATION of being permitted to compete, officiate, observe, work for, or participate in any way in ANY RIDER NETWORK EVENT(S) OR LOCATION(S) or being permitted to enter for any purpose any RESTRICTED AREA (defined as any area requiring special authorization, credentials or permission to enter or any area to which admission by the general public is restricted or prohibited, including but not limited to the competition area and any hot pit area), EACH OF THE UNDERSIGNED, for himself, herself, his or her personal representatives, heirs, and next of kin:

- 1. Acknowledges, agrees and represents that he/she has or will immediately upon entering any such RESTRICTED AREAS, and will continuously thereafter, inspect the RESTRICTED AREAS which he/she enters and he/she further agrees and warrants that, if at any time, he/she is in or about RESTRICTED AREAS and he/she feels anything to be unsafe, he/she will immediately advise the officials of such and will leave the RESTRICTED AREA prior to the event or entering and designated area.
- 2. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the promoters, participants, racing associations, sanctioning or administrative organizations or any affiliated entities thereof, track operations, track owners, officials, car owners, drivers, pit crews, rescue personnel, and any persons in any RESTRICTED AREA or EVENT(S), promoters, sponsors, advertisers, owners, lessors and lessees of premises used to conduct the EVENT(S), premises and event inspectors, surveyors, underwriters, brokers, consultants and others who give recommendations, directions, or instructions, or engage in risk evaluation or loss control activities regarding the premises or EVENT(S) and for each of them, their directors, officers, agents, and employees, all for the purposes herein referred to as "Releases", FROM ALL LIABILITY TO THE UNDERSIGNED FOR ALL YEARLY EVENTS AND RIDER NETWORK LOCATIONS, his/her personal representatives, assigns, heirs, and next of kin, FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFORE ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN THE DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO ALL RIDER NETWORK EVENT(S) AND ACTIVITIES, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASES OR OTHERWISE.
- 3. HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the RELEASES and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST INCLUDING BODILY INJURY OR PROPERTY DAMAGE they may incur arising out of my presence or participation in the ANY RIDER NETWORK EVENT(S) or ACTIVITIES whether caused by the NEGLIGENCE OF THE RELEASES or otherwise.
- 4. HEREBY ASSUMES FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to ANY RIDER NETWORK EVENT(S) or ACTIVITIES whether caused by the NEGLIGENCE OF THE RELEASES or otherwise.
- 5. HEREBY acknowledges that THE ACTIVITIES OF ANY EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of the UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASES.
- 6. HEREBY agrees that this annual Release and Waiver of Liability, Assumption of Risk and Indemnity Agreements extends to all acts of negligence by the RELEASES, INCLUDING NEGLIGENT RESCUE OPERATIONS and it intended to be as broad and inclusive as is permitted by the laws of the Province or State in which any RIDER NETWORK EVENT(S) AND ACTIVITIES is/are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE READ THIS ANNUAL RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST ALLOWED BY LAW.

<i>Signature</i>	I HAVE READ THIS RELEASE	<i>Date</i>
<i>Place Notary Seal Here</i>		

If Notarized) Subscribed and Sworn to at: _____	Before me this _____ day _____ A.D. 20 _____
Signature of Event Official or Notary Public	Printed name of Event Official or Notary Public
_____ County, State of _____	My Commission Expires: _____ Adult MS Waiver



ANNUAL YOUTH QUICK PASS APPLICATION & WAIVER

Welcome to the Rider Network! Please fill in the information fully, read over our waiver and sign the document at the bottom. Your Rider Network card will be processed in the order they are received. Please allow a few weeks for processing of your benefit card and account. Once the card is sent it will be active with your information so you can start saving time and money right away!

Minor Name:	Date of Birth:	
Address:	Phone:	
City:	State:	Zip:

ANNUAL RIDER NETWORK RELEASE AND WAIVER OF LIABILITY

ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

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- 3. HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the RELEASES and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST INCLUDING BODILY INJURY OR PROPERTY DAMAGE they may incur arising out of my presence or participation in the ANY RIDER NETWORK EVENT(S) or ACTIVITIES whether caused by the NEGLIGENCE OF THE RELEASES or otherwise.
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Minor Participant Signature: I HAVE READ THIS RELEASE	Date
Parent / Guardian Signature: I HAVE READ THIS RELEASE	Date
I represent that I have sole legal custody or am the sole parent/guardian (initial):	Father / Mother / Guardian
Printed Name:	Date
Parent / Guardian Signature: I HAVE READ THIS RELEASE	
Printed Name:	Father / Mother / Guardian

If Notarized Subscribed and Sworn to at: _____ Before me this _____ day _____ A.D. 20 _____
Signature of Event Official or Notary Public **I HAVE READ THIS RELEASE** Printed name of Event Official or Notary Public
_____ County, State of _____ My Commission Expires: _____ Minor MS Waiver

* Stamp or Seal Over Text