

NORTH STATE RACING ASSOCIATION
2195B Big Valley Rd Lakeport, CA 95453- (707)462-7242 Track (707)279-1917 Business Office

MEMBERSHIP and INSURANCE BENEFIT PLAN CONTRACT

In order to participate in NSRA sponsored racing events, all entrants must complete and have on file with NSRA this registration.

YEARLY REGISTRATION FEE \$50.00

TYPE OF MEMBERSHIP () Modifieds () Bombers () Bonus Bomber () Bandolero () Other _____
CAR# _____ (Required for all classes)

Driver _____ Owner _____ Mechanic _____ Passenger/Other _____

Name: Last _____ First _____ Middle Initial _____

Mailing Address _____ City/State _____ Zip _____

Telephone: Home _____ Business _____ Emergency _____

Social Security #: _____ Driver's License #: _____ E-Mail _____

Age _____ Date of Birth _____ Place of Birth _____

Spouse's Name _____ Children's Name/Ages _____

Next of Kin _____ Address _____

Your Employer _____ Address _____

Occupation _____ Health Insurance Company _____

Date of Last Physical Exam _____ Condition _____ Physical Handicap or Disability _____

BENEFICIARY STATEMENT: I hereby designate and name as Beneficiary:

Name _____ Address _____

AGREEMENT

CONTRACT: I hereby certify that I am an independent contractor, assuming all responsibility for monies received as a result of my activities at NSRA events, including, without eliminating, income taxes, FICA, worker's compensation, and withholding taxes. I am not an employee, servant or agent of the NSRA association. **CONSIDERATION AND COMPLIANCE:** In consideration of acceptance by NSRA of this application and payment of membership fees, the undersigned agrees to abide by all rules and regulations of NSRA as to conduct and mechanical specifications, as not published or hereafter modified. Undersigned further recognizes his/her obligation to the public and the NSRA Association, which posts the prize monies and conducts the events, and agrees to compete in all events for which he/she may be qualified, if humanly possible, on pit entry date.

BENEFITS: I understand and agree that I and my executors and assigns will be entitled to the benefits of the Competitors Accident Insurance Policy procured by NSRA accidental injuries or death which occur as the result of external, violent and visible means, sustained in NSRA sponsored events. The coverage of said policy shall constitute the limit of liability of NSRA for such injuries occurring to me in any NSRA event, provided proper notification of such occurrence is filled with NSRA.

ADVERTISING RELEASE: The undersigned consents to the use of his/her name and/or pictures of him/her and his/her car, for publicity, advertising and endorsements, before, during and after events, and relinquishes any rights to photos taken in connection with events, and consents to the publication or sale of such photos by NSRA.

ARBITRATION: Any dispute, controversy or claim involving the undersigned member, whether or not relating to this agreement or alleged breach of same, shall be settled in accordance with the existing and/or amended rules and regulations of NSRA, and the undersigned agrees to accept the decisions rendered by such process.

****BY MY SIGNATURE BELOW, I CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THIS AGREEMENT. I AGREE TO ABIDE BY ALL TERMS OF THIS AGREEMENT AND THE REQUIREMENTS AND RULES OF NSRA.**

DATED _____ DAY OF _____ 200 _____ LEGAL**

SIGNATURE _____

WITNESS _____

IF APPLICANT IS UNDER 18 YEARS OF AGE, A MINOR/PARENT RELEASE MUST BE EXECUTED AND FILED WITH THIS APPLICATION.