



2010 CREW APPLICATION

The AMA Racing credential eliminates the need to register and pay a fee at each event. Credentials are issued at the sole discretion of AMA Racing and entitle the holder access to the 2010 Monster AMA Supercross, FIM World Championship. This credential will not be issued to persons under the age of 16 years.

Credential Applicants must complete the following:

- Complete the attached Credential Application
- Read and Sign the Terms and Conditions form
- Read and sign the 2010 Adult Release and Waiver and Release of Liability & Indemnity Agreement and have it notarized. If considered a minor in your state of residence, a Parent/Guardian must sign and have notarized the bottom consent portion of the 2010 Minor Release and Wavier of Liability Indemnity Agreement.
- ***Read and sign the 2009-2010 Adult FMS All-Event Release, Waiver and Indemnity Agreement and have it notarized.***
- Include one (1) recent passport size photo
- Renew AMA Membership (see top of application) if it expires prior to December 31, 2010.
- The rider's name and AMA # must be listed on the application in order for your credential to be considered.

Once the above items are complete, please mail them to AMA Racing, Competition Services, 13515 Yarmouth Drive, Pickerington, OH 43147.

The following stipulations will apply to all Credential Holders:

- Crew Credential must be attached to the AMA Racing lanyard and worn at all times during events. Credentials attached to other lanyards will not be recognized.
- Credentials are not transferable and will be revoked immediately if used by any other person.
- Credentials purchased by a team or rider for a crew member may be substituted for a replacement crew member one time per season. The original credential must be returned with the application for the replacement crew member.

If you have any questions or concerns, please contact AMA Racing at 800-AMA-JOIN (262-5646)



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AMA Membership Information

PLEASE PRINT CLEARLY

AMA#: _____ Exp: _____

First Name: _____ Middle I _____ Last Name: _____

Date of Birth (MM/DD/YYYY): _____

Street Address: _____

City: _____ State: _____ Zip _____

Phone: _____ Cell: _____

E-Mail: _____

(Please complete top and bottom sections) Your membership must be current through December 2010.

DO NOT DETACH

2010 CREW CREDENTIAL APPLICATION

AMA#: _____ Exp: _____

First Name: _____ Middle I _____ Last Name: _____

Date of Birth (MM/DD/YYYY): _____

Street Address: _____

City: _____ State: _____ Zip _____

Phone: _____ Cell: _____

E-Mail: _____

Rider's Name: _____ Rider's AMA #: _____

Emergency Contact Name & Phone #: _____

License Type

Amount Due

SX Crew Credential \$464

\$ _____

AMA Life Members can subtract the membership fee of \$39. (Please allow 30 days to process)

Method of payment: (please check one)

Check/Money Order Visa MasterCard Discover American Express

Credit Card #: _____ Exp. Date: _____

Card Holder's Signature: _____

Printed name of person/team purchasing credential: _____

Be sure to include the following:

One (1) passport size photo

2010 Annual Participant Waiver & Release signed and notarized

Signed Terms and Conditions Form

Please mail to: AMA Racing, 13515 Yarmouth Drive, Pickerington, OH 43147

AMA Racing Use Only

Authorization: _____ Date Mailed: _____

Type of Credential: **CREW**

Access issued: **SX**

Primary Discipline: **SX**

AMA RACING CREDENTIAL TERMS AND CONDITIONS

In consideration of being granted a 2010 AMA Racing Credential by the American Motorcycle Association, Inc., d/b/a/ AMA (hereinafter "AMA"):

1. **Drug and Alcohol Testing; Release:** I recognize the importance of maintaining the safety and integrity of professional motorcycle racing. Accordingly, I agree to strictly comply with the "AMA 2010 Supercross Series Rulebook" and its' Substance Abuse Policy (the "Policy"). I understand that my agreement to comply with the Policy is an essential precondition to the issuance of a professional license and that I must abide by the Policy and submit to such testing procedures as may be conducted from time to time at the sole discretion of AMA or its assigns as a condition of continued licensure. I further understand that any violation of the Policy, or failure or refusal to submit to testing and honestly participate in any testing procedure, will result in immediate disciplinary action in any AMA sanctioned events. Finally, I hereby release and hold harmless AMA, their respective directors, trustees, officers, employees, agents as well as any consultants and any laboratories or testing facilities retained by AMA or its assigns for the purpose of conducting drug or alcohol tests in connection with the Policy, from any and all liability related in any way to any tests conducted in connection with the Policy or the disclosure of the results of any such tests.

2. **Physical Examination:** I certify that I am in good health and suffer from no illness or injury which impairs in any way my ability to participate in motorcycle racing events. I agree to inform AMA of any medical condition, injury or illness which in any way casts a question on my ability to participate in a safe and competent manner. I agree to immediately notify AMA of any change in my medical condition that could in any way affect my ability to participate in a safe and competent manner. I also agree to comply with any request from AMA regarding evidence of medical condition. I understand that AMA retains the right to prevent me from participating in sanctioned events pending examination(s) to determine my medical condition or my ability to participate in a safe and competent manner.

3. **Production and Promotion Rights:** I agree that all rights, property, and interest in any broadcast by audio, radio, television, motion pictures, home video production, Internet or any other means or media (including the transcription of any broadcast) of any AMA sanctioned event shall be the sole property of AMA. Any and all revenues from any broadcast shall belong to AMA for its sole and unlimited use. I hereby consent to the use of my images of and waive any intellectual property interests that I own that would in any way interfere with any broadcast of any AMA sanctioned event.

I further agree that AMA or its assigns, on a non-exclusive basis, may use my name and pictures (including pictures of my racing equipment, if owned by me, and pictures taken at any sanctioned event) for any purpose and in any media including, but not limited to, television, internet, motion pictures and home video production.

I also understand that AMA may, from time to time, engage a sports marketing firm, to, among other things, promote the image of AMA professional motorcycle racing, and I agree to cooperate with AMA and its sports marketing firm in such efforts.

4. **Independent Contractor:** I hereby certify that I am not an agent or employee of AMA, and I assume all responsibility for all charges, premiums and taxes, if any, payable on any funds that I may receive as a result of my competitive activities, including without limitation social security taxes, unemployment insurance taxes, compensation insurance, income taxes and withholding taxes.

5. **Credential Holder:** I represent that I am a member in good standing of the AMA or will join such association and pay applicable dues and any other required fees when registering as a Credential Holder. I understand that a person registering as a Credential Holder is subject to the AMA 2010 Supercross Series Rulebook and I confirm that I am 16 years of age or older.

6. **Waiver:** I acknowledge that motorcycle racing is a dangerous activity, the risks of which cannot be completely eliminated. I acknowledge that by participating in any AMA sanctioned event, I am assuming the risk of property damage and serious injury up to and including death. I acknowledge that I will have the opportunity to inspect and review any and all courses upon which AMA sanctioned events shall be conducted, and I waive any and all claims for personal property damage, injury, or death against AMA or any of their respective directors, officers, employees, or agents.

7. **Insurance Coverage:** I certify that I have primary medical, permanent disability and life insurance coverage for injuries that occur during AMA competition and official practices.

8. **Acknowledgment and Representation:** I acknowledge and understand that it is my responsibility to properly maintain this license. I understand that my license is subject to the AMA 2010 Supercross Series Rulebook. I represent that I am not contractually or otherwise prohibited from entering into any and all of the agreements set forth in Paragraphs 1 through 8 hereof.

I further acknowledge that this license/credential has been issued by AMA for the exclusive use by me. I agree to act in accordance with the AMA 2010 Supercross Series Rulebook, which serves as the official competition rules of the AMA Supercross Series and agree to abide by any amendments or supplemental rules. Transfer or misuse of this license/credential is cause for revocation.

Signature: _____

Date: _____

Printed Name: _____