

MEMBERSHIP APPLICATION

THE UNDERSIGNED HEREBY APPLIES FOR MEMBERSHIP AS (CIRCLE ONE)

DRIVER: \$75.00 ()

ASSOCIATE \$20.00 ()

INDIVIDUAL CAR

OWNER \$50

(Each additional car requires a separate application form, may be copied)

Name:			
Address:			_
City, State, Zip:			
Contact Phone:			
Email:			
Driver's License (Driver's Only):			
Date of Birth:			
EMERGENCY CONTACT:			
Name:	Address:		
	Phone:		
Date: Signature:			
Car Affiliation:		Car #:	

PLEASE MAKE CHECKS PAYABLE TO ATQMVC @ 27 Beaver Run Rd Lafayette NJ 07848

In consideration of the acceptance by ATQMVC Inc. of my membership application and insurance of same, I do hereby release, rescind and discharge ATQMVC, Inc., the promoters, presenting races or other events under ATQMVC Inc. sanction, and the owners and lessees of premises in which ATQMVC Inc. sanctioned races or other events are promoted. And the officers, directors, agents, employees, and servants of all of the aforementioned of and from all liability, claims, actions, and possible causes of action, whosoever may accrue to me or to my heirs, next of kin and personal representative, from any and every loss, damage and injury (including death) that may be sustained by my person and property, while in, about and en route into and out of premises where ATQMVC Inc. sanctioned races or other events are presented. I have read and fully understand the foregoing and certify and represent that the above answers are true. I agree to abide by the rules and regulations of the ATQMVC Inc. and to accept in final, all decisions of properly authorized ATQMVC Inc. officials.