



Event Name: 2011 NBL Grand Nationals
9/01/11 - 9/04/11
Derby City BMX, Louisville, KY

PERSONAL INFORMATION	
Name of Participant (Please Print)	
NBL Membership Number	Expiration Date / /
20" Bike Number	Cruiser Bike Number
Racing Age and Proficiency	Date of Birth / /
Participant's Phone Number () -	
Address	
City, State, & Zip	
EMERGENCY CONTACT INFORMATION	
Emergency Contact Name	
Emergency Contact Phone Number () -	

Please Send Money Order or Cashier's Check.
 Make Money Order out to: "USA BMX"

Credit Card Number	
Name as it Appears on Card	
Signature	
Total	Expiration Date / /
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMEX	

arising from surface hazards, equipment failure, inadequate safety equipment, THE RELEASEES' OWN NEGLIGENCE, and weather conditions; and the possibility of serious physical and/or mental trauma or injury associated with athletic cycling competition.

For myself, my heirs, executors, administrators, legal representatives, assignees, and successors in interest (collectively "successors") I HEREBY WAIVE, RELEASE, DISCHARGE, HOLD HARMLESS, AND PROMISE NOT TO SUE AND INDEMNIFY the Releasees and the sponsors of this event, the organizer and any promoting organizations, property owners, law enforcement agencies, all public entities, special districts and properties, and their respective agents, officials, and employees through or by which the events will be held, (the foregoing are also collectively deemed to be Releasees), FROM ANY AND ALL RIGHTS AND CLAIMS INCLUDING CLAIMS ARISING FROM THE RELEASEE'S OWN NEGLIGENCE, which I have or which may hereafter accrue to me and from any and all damages which may be sustained by me directly or indirectly in connection with, or arising out of my participation in or association with the event, or travel to or return from the event.

I agree it is my sole responsibility to be familiar with the racing course, the Releasees rules and any special regulations for the event. I understand and agree that situations may arise during the event which may be beyond the immediate control of the race officials or organizers, and I must continually ride so as to neither endanger myself nor others. I further agree and warrant that if any time I believe conditions to be unsafe, I will immediately discontinue further participation. I accept responsibility for the condition and adequacy of my competition equipment. I will compete wearing a helmet which satisfies the requirements of the Releasees Racing Rules or Regulations and that can protect against serious head injury; and assume all responsibility and liability for the selection of such a helmet. I have no physical or medical condition which to my knowledge, would endanger myself or others if I participate in this event, or would interfere with my ability to participate in this event.

I agree, for myself and my successors, that the above representations are contractually binding; and are not mere recitals, and that should I or my successors assert my claim in contravention of this agreement, the asserting party shall be liable for the expenses (including legal fees) incurred by the other party or parties in defending, unless the other party or parties are finally adjudged liable on such claim or willful and wanton negligence. This agreement may not be modified orally, and a waiver of any provision shall not be construed as a modification of any other provision herein or as consent to any other provision herein or as a consent to any subsequent waiver or modification.

Every term and provision of this agreement is intended to be severable. If any one or more of them is found to be unenforceable or invalid, that shall not affect the other terms and provisions, which shall remain binding and enforceable.

Thursday Practice - 09/01	COST
<input type="checkbox"/> Practice	\$15

All Challenge Championship - 09/02	COST
<input type="checkbox"/> Class*	\$50
<input type="checkbox"/> Cruiser*	\$50
<input type="checkbox"/> Open	\$40

*Riders Must be Qualified, however any rider may race Open

Grand Nationals - 09/03-04	COST
<input type="checkbox"/> Striders	\$20
<input type="checkbox"/> Class	\$60
<input type="checkbox"/> Cruiser	\$60
<input type="checkbox"/> Open	\$50

Friday UCI - 09/02	COST
<input type="checkbox"/> Jr Men (UCI)	\$60
<input type="checkbox"/> Jr Women (UCI)	\$60
<input type="checkbox"/> Elite Women (UCI)	\$60
<input type="checkbox"/> Elite Men (UCI)	\$120

Saturday UCI - 09/03	COST
<input type="checkbox"/> Jr Men (UCI)	\$60
<input type="checkbox"/> Jr Women (UCI)	\$60
<input type="checkbox"/> Elite Women (UCI)	\$60
<input type="checkbox"/> Elite Men (UCI)	\$120
<input type="checkbox"/> A-Elite	\$60
<input type="checkbox"/> Masters	\$60

Sunday Elite Classic - 09/04	COST
<input type="checkbox"/> AA Elite Women	\$60
<input type="checkbox"/> AA Elite Men	\$120
<input type="checkbox"/> A-Elite	\$60
<input type="checkbox"/> Masters	\$60

**NOTICE: All pre-entry forms are due in the USA BMX office by no later than the following:
 Mail Postmark by 8/17 or Email/Fax by 8/24.
 Post registration fee is an additional \$10 to the price listed above.**

STANDARD ATHLETE'S ENTRY BLANK AND RELEASE FORM:
 I ACKNOWLEDGE THAT BY SIGNING THIS DOCUMENT, I AM RELEASING USA BMX, American Bicycle Association (ABA), National Bicycle League, Inc. (NBL), AND THEIR RESPECTIVE AGENTS, EMPLOYEES, MEMBERS, SPONSORS, PROMOTERS, AND AFFILIATES COLLECTIVELY ("RELEASEES") FROM LIABILITY. THIS ENTRY BLANK AND RELEASE IS A CONTRACT WITH LEGAL CONSEQUENCES. I HAVE BEEN ADVISED TO READ IT CAREFULLY BEFORE SIGNING.

In consideration of the Releasees or USA BMX, ABA, and NBL's issuance of a license to me or the acceptance of my application for entry in the above event, I hereby freely agree to and make the following contractual representations and agreements.

I acknowledge that cycling is an inherently dangerous sport and fully realize the dangers of participating in a bicycle race and FULLY ASSUME THE RISKS ASSOCIATED WITH SUCH PARTICIPATION INCLUDING, by way of example, and not limitation, the following: the dangers of collision with pedestrians, dangers of vehicles, other racers, and fixed or moving objects; the dangers of serious physical and/or mental trauma or injury associated with athletic cycling competition; and the possibility of serious physical and/or mental trauma or injury associated with athletic cycling competition.

Signature of Participant

Today's Date

 / /

CONSENT AND RELEASE OF THE PARENT OR GUARDIAN:

I am the Parent or Guardian of:

(Child's Name)

My Child is fit for the race, and I consent to my Child's participation. I HAVE READ AND I UNDERSTAND THE ATHLETE'S COMPETITION AND RELEASE AGREEMENT. In consideration of allowing my Child to participate, I consent to it and agree that ITS TERMS SHALL LIKEWISE BIND ME, MY CHILD, my heirs, legal representatives, and assignees. I HEREBY RELEASE AND SHALL DEFEND, INDEMNIFY, AND HOLD HARMLESS THE RELEASEES FROM EVERY CLAIM AND ANY LIABILITY that I or my Child may allege against the Releasees (including reasonable attorney's fees or costs) as a direct or indirect result of injury to me or my Child because of my Child's participation in the Race, WHETHER CAUSED BY NEGLIGENCE OF THE RELEASEES or others. I PROMISE NOT TO SUE RELEASEES on my behalf or on behalf of my Child regarding any claim arising from my Child's participation in the Race.

Check one: **Signature of Parent or Guardian**

- Parent
 Guardian

Today's Date

 / /



APPLICATION FOR MEMBERSHIP

If you have not completed a USA BMX membership application, please complete and submit the below application with your pre-registration form.



APPLICATION FOR MEMBERSHIP

P.O. Box 718, Chandler, Arizona 85244, Phone: (480) 961-1903 / Fax: (480) 961-1842

I do hereby make application for membership to USA BMX, the American Bicycle Association (ABA) and the National Bicycle Association (NBL). I agree to comply with all rules and regulations for all activities and understand that I am fully responsible for my actions. Memberships must be current through the end of the points season (December 15th) to earn rankings and awards.

Today's Date _____ Male Female

Name (Please Print) _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Date of Birth _____ Age _____

E-mail Address _____ Credit my membership to track _____

PLEASE CHECK APPROPRIATE BOXES BELOW

STEP 1 NEW MEMBERSHIP : Serial # _____ RENEWAL: Serial # _____

STEP 2 NOVICE (MALE OR FEMALE) INTER EXPERT GIRL CRUISER GIRL CRUISER PRO

STEP 3

<input type="checkbox"/> NBL MEMBER (WILL EXPIRE DEC 31, 2011).....	N/C
<input type="checkbox"/> 30 DAY TRIAL MEMBER / STRIDER.....	\$ 25
<input type="checkbox"/> GOLD MEMBER (ABA USE ONLY) (BEST VALUE FOR NATIONALS).....	\$100
<input type="checkbox"/> FIRST FAMILY MEMBER.....	\$ 45

You must provide serial numbers of previous family members to allow discounted fees. PULL! Magazine will only be sent to the first family member.

<input type="checkbox"/> SECOND FAMILY MEMBER.....	Serial # of 1st Family Member _____	\$ 40
<input type="checkbox"/> THIRD & ADDITIONAL FAMILY MEMBERS....	Serial # of 2nd Family Member _____	\$ 35
<input type="checkbox"/> CRUISER w/20" DISCOUNT.....	20" Serial # _____	\$ 35
<input type="checkbox"/> 20" w/CRUISER.....	Cruiser Serial # _____	\$ 35
<input type="checkbox"/> PRO.....	Social Security # _____	\$ 70
<input type="checkbox"/> PRO CRUISER.....	Social Security # _____	\$ 70
<input type="checkbox"/> TEMPORARY CONVERSION (Trial membership stub must be attached. Free 30-day trial is NOT APPLICABLE).....		\$ 25
<input type="checkbox"/> PULL! MAGAZINE SUBSCRIPTION ONLY.....		\$ 26

MEDICAL RELEASE - ADDITIONAL CONDITIONS

1. The applicant and his/her representative agree that, in the event that the applicant requires medical or surgical treatment while under the supervision of USA BMX, ABA and/or NBL personnel in connection with any sponsored activity or trip, such USA BMX, ABA and/or NBL personnel may authorize medical treatment for the applicant. The applicant and his representative agree to pay for all medical, hospital, or other expenses which the applicant may incur as a result of such treatment.

2. As a participant in events sanctioned and/or promoted by USA BMX, ABA and/or NBL, the applicant and his/her representative hereby grant USA BMX, ABA and/or NBL and its legal assigns, representatives, and corporations the right and permission to copyright and/or use, publish and reuse and republish and license photographic pictures, video or audio that is or has been recorded as part or portion of an USA BMX, ABA and/or NBL event, photo-shoot or related activity. This release will also allow the USA BMX, ABA and/or NBL to use the applicant's name and likeness as part of any advertising, marketing, sale of goods, or televised video production by USA BMX, ABA and/or NBL or if licensed to a third party.

ALL MINORS MUST HAVE SIGNATURE OF PARENT /GUARDIAN.

Applicant or Parent/Guardian _____

Enclosed is my check for \$ _____ Please charge my VISA MasterCard American Express Discover

Credit Card Acct. # _____ Expiration Date _____ \$ _____

NOTE: USA BMX must receive a copy of your Birth Certificate within 30 days.

6/2011 **APPLICANT MUST READ AND SIGN THE FRONT AND BACK OF THIS FORM. NO EXCEPTIONS.**

**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK,
AND INDEMNITY AGREEMENT ("AGREEMENT")**

In consideration of participating in **USA BMX, ABA and/or NBL BMX Racing Program** I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the Activity.

I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the Activity.

I hereby release, discharge, and covenant not to sue **USA BMX, American Bicycle Association, and/or National Bicycle League**, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Printed name of participant _____ Date: _____

Signature of participant _____

PARENTAL CONSENT

AND I, the minor's parent and/or legal guardian, understand the nature of the above referenced activities and the minor's experience and capabilities and believe the minor to be qualified to participate in such activity. I hereby release, discharge, covenant not to sue and AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS each of the Releasees from all liability, claims, demands, losses, or damages on the minor's account caused or alleged to have been caused in whole or in part by the negligence of the Releasees or otherwise, including negligent rescue operations, and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the above Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

Printed name of Parent/Guardian _____ Date: _____

Signature of Parent/Guardian _____