



and/or

2022 Membership Form

BOTH As of Jan	uary 1 st 2022: 1 st and 2 nd fa	•	
WSP	Must be child o Series = WSP Series, NEMX	r spouse or sibling Travel Series = NI	
Name:	Add	ress:	
City:	State:	Zip:	Phone:
Date of Birth:	Age:	copy of bir	th cert or license on file?
Transponder#	Emerg	gency Contact:	
Choose 3 Bike #'s NO	O X's (Used for One Day	Members) ren	ew 2022 race # by12/31/21
Bike - 1st choice	2 nd choice	3 rd	Choice

50 4-6	50 7-8	50 Open 4-9	65 7-9	65 10-11
65 Open 7-12	85 9-11	85 12-15	Supermini 9-16	Schoolboy 12-17**
250 C	250 B	250 A	450 C	450 B
450 A	Open C	Open B	Open A	30 C
30 B	30 A	40 C	40 B	40 A
50+	55+	Women 85+	Girls 9-15*	

^{*}GIRLS CLASS: 65-112cc 2-stroke and 110-150cc 4-stroke

You must have a Transponder to participate - purchase online at MX Transponder.com or \$10 Day Rental with deposit

After 3/31//22 – Forms/Memberships accepted at track only – not by ma

CC#	 -	-	exp:	Code#

^{**}SCHOOLBOY 12-17: Supermini to 150cc 2-stroke and 150cc big wheel to 250cc 4-stroke

Winchester Speedpark, New England Mx Release Form WSP 512 & 517 Keene Rd, 12 Bell Ct Winchester, NH 03470

Motocross Track - Supercross Track - Away Tracks
WSP = Winchester Speedpark - NEMX = New England Motocross
RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

IN CONSIDERATION of being permitted to participate in any way in the sport and activities of Motocross/Supercross under the auspices of WSP Racing LLC, New England Motocross LLC, and WSP Real Estate LLC or any WSP Series or NEMX event, I acknowledge, appreciate, and agree that: 1. The risk of injury from the activity and equipment involved in motorized off road activities is significant including the potential for permanent disability and death, and while particular protective equipment and personal discipline will minimize this risk, the risk of serious injury does exist; 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown EVEN IF ARISING FROM THE NEGLIGENCE of those persons released from liability below, AND ASSUME ALL RESPONSIBILITY FOR MY PARTICIPATION; and, 3. I understand that the activities of motorized off road activities are physically and mentally intense. I understand the rules of play and will comply with all rules and regulations. If I observe any unusual or unnecessary hazards during my participation, I will bring such to the attention of the nearest official as soon as practical AND LEAVE THE AREA; I understand and accept that weather, other riders and grooming procedures change the course conditions at any time before and throughout the day. 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, FOREVER RELEASE AND HOLD HARMLESS WSP RACING LLC, WSP REAL ESTATE LLC, NEW ENGLAND MOTOCROSS LLC THE OWNERS AND LESSORS OF THE PREMISESUSED TO CONDUCT THE MOTORIZED OFF ROAD ACTIVITIES, THEIR OFFICERS, OFFICIALS, AGENTS, PROMOTERS, SPONSORS AND/OR EMPLOYEES ("Releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR **OTHERWISE. 5.** I understand and agree that the release of Liability AGREEMENT covers each and every motorized off-road activity and/or event in which I participate or attend hereafter. 6. I UNDERSTAND THAT THE PROMOTERS OF WSP RACING LLC, WSP REAL ESTATE LLC, NEW ENGLAND MOTOCROSS LLC DO NOT PROVIDE HEALTH INSURANCE. THE UNDERSIGNED FURTHER AGREES TO ASSUME ALL RESPONSIBILITY FOR DOCTOR, AMUBULANCE, HOSPITAL AND MEDICAL EXPENSES AND ANY LOSS OR INJURY TO ME/THE MINOR AND/OR PERSONAL PROPERTY DUE TO PARTICIPATION IN ANYNEMX or WINCHESTER SPEEDPARK EVENT. THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducements apart from the forgoing written agreement have been made. TRACKS: WSP MX/SX, WAREHAM MX, MIDDLEBORO, MX207, SOUTHWICK, NHMX, HEMONDS OR ANY 2022 TRACK YOU VISIT/RACE UNDER OUR ORGANIZATION'S SCHEDULED RACES.

I HAVE READ THIS RELEASE

I have and will maintain health insurance to race and or practice at WSP/NEMX events and I have Read the Rules for WSP/NEMX and agree to comply

Date Signed: PRINT NAME <u>CLEARLY</u> Printed name of rider appearing Before me	/	
Applicant's Signature: Rider signature and/or mother/father/guardian		
Notary and Stamp		