



Application for Atlantic Grand Prix Youth Competition Barcode and Number.

Please Fill in information below and Print Neatly.

Name: _____
 First Middle Last

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: (_____) _____

E-Mail: _____

Age: _____ Date-of-birth: _____

If you have ATVA/AMA Number, please fill in below.... If not it is available at sign-up.

ATVA/AMA #: _____ Exp Date: _____

OHV type: _____

Note: all applications must be **Notarized** to qualify for points. **Must include a copy of the participant's birth certificate.**

Atlantic Grand Prix youth Hare Scramble Barcode and Number Cost **\$10.00** for 2007 season.

Include a self-addressed, stamped envelope with your application.

Make checks payable to: AGP Productions LLC

Mail to:
 AGP Productions LLC
 26 Brentwood Drive
 Burlington NJ 08016

E-Mail Questions to: info@atlanticgrandprix.com
 Website for applications, information and points:
<http://www.AtlanticGrandPrix.com>

Youth Quad

Check Class:

- 91cc -200cc 2-stroke
91-300 cc 4-stroke
production ATV (13-15)
- 90 Modified (11-15)
- 90 Modified (8-10)
- 90 Limited (11-15)
- 90 Limited (8-10)
- 70 CVT (6-11)

Youth Mini Cycle

Check Class:

- Big Wheel (14-15)
- Big Wheel (12-13)
- 85 (14-15)
- 85 (12-13)
- 85 (7-11)
- 65 (10-11)
- 65 (7-9)
- 80-150cc (12-15)
- 80-125cc (10-11)

Pee wee Mini Cycle

Check Class:

- 65 (7-9)
- 50 (4-8)
- 110cc 10-12 EL
- 110cc 4-9 EL
- 50cc (4-8) Oi

I request #1 _____ or #2 _____

(Please give 2 request in the event that one has been already taken.) Your Barcode will be mailed to you along with your rider number. If you are riding for points in another Off-Road Series and already have a number, please put it here.# _____

We will try to keep the number you're using in that series, but please keep in mind all number will be on a first come basis so please get your info in ASAP.

Please read and Notarize signatures on the back of this application. Please read AGP and AMA rules.

Once you are assigned a number please put that number on your number plates. This helps us to identify your rider. Your cooperation in this matter is greatly appreciated. This application is for the Atlantic Grand Prix Youth Series ONLY.



THIS IS A RELEASE AND INDEMNITY AGREEMENT

In consideration of being granted an amateur competition number and in consideration of being permitted to enter competition events sanctioned by the All-Terrain Vehicle Association, the American Motorcycle Association, Atlantic Grand Prix series and APG Productions LLC.

I hereby give up all of my rights to sue or make any claim whatsoever against the All-Terrain Vehicle Association, the American Motorcycle Association, Atlantic Grand Prix series, APG Productions LLC., and their districts organizations, the sponsors, and any other persons or organizations conducting or connected with this event for any injury to property or person I may suffer, including crippling injury or death, whether such injury arises while I am preparing for or participating in the event or while on the premises.

I know the risks of danger to myself and my property while participating in the event and while on the event premises and am relying upon my own judgment and abilities, and assume all such risks of loss and hereby agree to reimburse all costs to those persons or organizations connected with this event for damages incurred as a result of any injury that I cause or receive.

I hereby certify that 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 tax and withholding taxes.

I understand that a Atlantic Grand Prix Youth Competition Barcode and Number for Amateur Events is subject to All-Terrain Vehicle Association, American Motorcycle Association Rules for competition and that of the Atlantic Grand Prix Series and APG Productions LLC.

It is understood and agreed that in the event that I am injured from whatsoever cause during an event authorized and operated under AMA/ATVA/AGP rules, I herewith consent to and authorized first aid and ambulance service as provided by the sponsoring club or property owners, and further to hold all parties harmless from any consequences of said aid.

Parents: By signing this Application it gives consent to put your child's name and pictures on the AtlanticGrandPrix.com website.

Check if you DO NOT want your child's name and photos on the AtlanticGrandPrix.com website.

I have read This Application and hereby make oath and say that to the best of my knowledge and belief all statements set forth in this report are true and correct.

Rider's Signature
Sign in **INK ONLY!**

Date: _____

NOTICE, IF UNDER 18 YEARS OF AGE, which applies to the law of the states of New Jersey, Pennsylvania, New York and Delaware. This application must bear the notarized signature of parent or guardian which shall acknowledge a waiver of any and all claims such parents or guardian may have.

Parents or Guardians Signatures

(Both living parents and/or legal guardian must sign below.)

Mother

Father

Subscribed and sworn before me this _____ day

of _____, 20_____.

Notary Public

Notary Public