**CLARION COUNTY FAIR AMATEUR DRAG RACING**

**PARTICIPANT REGISTRATION & RELEASE FORM**

FEES & CLASSES:

 \_\_\_\_\_ QUAD/BIKE CLASSES - $10

 \_\_\_\_\_ UTV CLASSES -$10

 \_\_\_\_\_ PIT PASS -$20 (DRIVER & 1 HELPER AT NO CHARGE)

“OFFICIALS DECISIONS ARE FINAL”

EACH CLASS REQUIRES A SEPARATE REGISTRATION FORM

PARTICIPANTSNAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_AGE:\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UNIT MAKE, MODEL, YEAR, CC’S:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This is a Release & Indemnity Agreement – READ IT BEFORE SIGNING**

1. **ACKNOWLEDGE**, agree, and 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 further agree and warrant that if, at any time, I believe the conditions to be unsafe, I will immediately discontinue further participation in this ACTIVITY.
2. **FULLY UNDERSTAND** that: (a) THIS ACTIVITY INVOLVES RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH [“RISKS”]; (b) these RISKS and dangers may be caused by my own actions or inactions, the actions or inactions of other participating in the ACTIVTY, the conditions in which the ACTIVITY takes place, or THE NEGLIGENCE OF THE “RELEASEES” NAMED BELOW; (c) there may be OTHER RISKS or SOCIAL AND ECONOMIC LOSSES 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.
3. **HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE** the **Clarion County Fair Association,** their administrators, directors, agents, officers, members, volunteers, and employees, officials, rescue personnel, sponsors or advertisers (each of the forgoing shall be considered one of the RELESEES 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 RELESEES OR OTHERWISE, LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the RELESEES, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELESEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may be incurred as the result of such claim.

I ACKNOWLEDGE THAT I HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE, AND I INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENET 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.

PARTICIPANTS SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT’S SIGNATURE IF MINOR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_