

Monterey Bay Karters

Club Membership Application

2012

Last Name: _____	First Name: _____	M.I.: _____
Address: _____		
City: _____	State: _____	Zip: _____
Phone: _____	D.O.B.: _____	Email: _____

Individual Membership \$75/year

Family Membership \$125/year

(Immediate family members, under 21 years old, residing at same address)

Reserved Pit: \$100/year

Name:	Age:	D.O.B.

PARENTS STATEMENT OF HEALTH FOR PERSONS UNDER 18 YEARS OF AGE

I do hereby certify that:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

..is in apparent good health and physically able to participate in the strenuous activities of karting at sea level and at altitudes up to 7,000 feet with such activities further stressed by exposure to conditions of humidity and temperature. Further it is also stated that the above named minor(s) is not subject to fainting, loss of balance, loss of muscular coordination, and in general is free of other physical ailments that could be aggravated by the stress of driving kart competition events and thereby placing her or himself, competitors, spectators, and others in attendance in jeopardy of injury.

Family members ages 5, 6, or 7 years old must provide a copy of their birth certificate with application to be eligible to race. Call a Board member or see the track steward for clarification.

Further, pursuant to the best interests of the above named minor(s), competitors, spectators, and others in attendance at kart competition events; there is no intent to conceal a possible physical condition when such revelation would be ample cause for **Monterey Bay Karters** to withhold issuing membership, or in any way ratify the participation of said minor(s) in karting events promoted by **Monterey Bay Karters**.

DATE OF LAST PHYSICAL EXAMINATION FOR PERSONS UNDER AGE 18 (DOCTOR'S SIGNATURE NOT NECESSARY)

Name:	Date:

Signed: _____ Date: _____

Checks payable to: Monterey Bay Karters or MBK

MONTEREY BAY KARTERS, c/o EJ KOLB, 1130 FREMONT BLVD. #341, SEASIDE, CA 93955