



**BC OLDTIMERS MOTOCROSS CLUB  
2020 MEMBERSHIP APPLICATION  
WWW.BCOTMOTOCROSS.COM**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Riding #: \_\_\_\_\_ Make of Motorcycle: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_

Prov/State: \_\_\_\_\_ Postal/Zip: \_\_\_\_\_ Phone: (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_

Age: \_\_\_\_\_ Birthday: (day) \_\_\_\_\_ (month): \_\_\_\_\_ (year): \_\_\_\_\_

**Membership Type:**

Single Membership \$25

Family Membership \$40

**Be ready on practice or race day!**

Mail your application form to: BCOT c/o 37625 Batt Rd. Abbotsford, BC, V3G 2L3

Make cheque payable to: BC Oldtimers Motocross Club

**Rider Classification - PLEASE CIRCLE**

+40	+50	+60	+70	+75/80	+30	Support
Master	Master	Master	Master	+75	Expert	Expert
Expert	Expert	Expert	Expert	+80	Intermediate	Intermediate
Intermediate	Intermediate	Intermediate	Intermediate		Novice	Novice
Novice	Novice	Novice	Novice			

I am participating voluntarily as a member in BC Oldtimers Motocross Club, and I hereby release, and agree to hold harmless, BC Oldtimers Motocross Club, the promoters, the owners and lessees of the premises on which club related events may occur, the participants and the officers, directors, officials, representatives, agents and employees of all of them, of and from all liability, loss, claims and demands that may accrue from any loss, damage or injury (including death) to my person or property, in any way resulting from or arising in connection with participation in an event, and whether arising while engaged in competition or in practice or preparation therefore, or while upon entering or departing from said premises, from any cause whatsoever. I know the risk and danger to myself and property while upon said premises or while participating or assisting in an event, so voluntarily and in reliance upon my own judgment and ability, I thereby assume all risk for loss, damage, or injury (including death) to myself and property from any cause whatsoever. This is a legal agreement. I have read and understood all its terms and by signing it voluntarily I am agreeing to abide by these terms.

Signed on this (day) : \_\_\_\_\_ of (month): \_\_\_\_\_, 2020

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature of Parent/Gaurdian if Participant under 18