



## Saskatoon Off-Road Radio Control Club Inc. 2016 Membership / Participation Form

### DRIVER INFO:

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

SORRCC Forum User ID: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### MEMBERSHIP / RACE FEES:

*Check One:*

☐ Single Membership - \$150.00    ☐ *First Time* Single Membership - \$50.00

☐ Family Membership - \$175.00    ☐ *First Time* Family Membership - \$65.00

☐ Non-Member Race - \$20.00    ☐ Non-Member Practice - \$5.00

☐ Rental Transponder - \$5.00

**FEES: \$ \_\_\_\_\_**

**RAFFLE TICKETS: \$ - \_\_\_\_\_** (Max \$50 Credit - Single or Family Membership Only)

**TOTAL: \$ \_\_\_\_\_**

Fee Collected By: \_\_\_\_\_ Date: \_\_\_\_\_



## Saskatoon Off-Road Radio Control Club Inc. 2016 Membership / Participation Form

### ***Acknowledgment of Risk, Release of Liability and Indemnity Agreement.***

I acknowledge that I have voluntarily applied to participate in Saskatoon Off-Road Radio Control Club Inc. (SORRCC) activities. I understand that I may elect not to participate in these activities rather than sign this Release.

I am aware of the risks, dangers and hazards associated with operating radio control vehicles and entering the Saskatoon Off-Road Radio Control Club Inc. race facility.

In return for allowing me to use the Saskatoon Off-Road Radio Control Club Inc. race facility and participate in events:

- I freely accept and assume all such risks, dangers, and hazards including the possibility of personal injury, death, property damage or loss.
- I accept responsibility for any personal or property damage or loss caused by or as a result of my participation.
- I agree to hold harmless and indemnify the Saskatoon Off-Road Radio Control Club Inc., its directors, officers, volunteers, and members from any and all claims and liabilities arising out of my participation.

My signature certifies that I understand and accept the conditions required for SORRCC participation listed above.

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Signature of Participant

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Signature of Witness

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Signature of Parent or Guardian  
(if participant is a minor)