

Horse Creek XC Race Entry Form

Pre-Registration is open until the Wednesday before race day. Mail to: **Horse Creek XC, 2931 Weaver Avenue, Billings, MT 59101.**

Make Checks Payable to: Horse Creek XC

Name _____ 406XC# _____

Address _____ City _____ State _____ Zip _____

Phone (____) _____ Email _____

Machine Make/Model _____ Riders Adult T-shirt Size _____ * (Cost of t-shirt is

included in Registration if you pre-register before April 7th)

Saturday Events: PRE-REGISTRATION: \$35.00. 50cc race registration is free

50 cc 4-8	65 cc 7-11	85cc jr 7-11	85 cc 12-15	Super Mini 12-15	Girls 12-15	Women C
Vintage						

Sunday Events: PRE-REGISTRATION: \$50.00. Open A Registration: \$60.00

Circle one class only:

3 Hours	2 Hours	1.5 Hours
Open A	Open B	Schoolboy
Vet A (30+)	Vet B (30+)	Mens C
Senior A (40+)	Senior B (40+)	
250 A	250 B	
Super Senior A (50+)	Super Senior B (50+) / Masters (60+)	
Women's A	Women's B	

NOTICE AND RELEASE:

I hereby acknowledge that I am aware of the risks inherent in the activity of using the facilities of the Adams Ranch/Horse Creek XC, near Melstone, MT for dirt bike riding and spectating, including the risk of personal injury to myself and property damage to my property. Therefore, I hereby assume the risk of injury or damage to my property while using the above mentioned facilities and in consideration of the use of said facilities, I hereby release Adams Ranch/Horse Creek XC and waive any claim, demand or cause of action against Adams Ranch/Horse Creek XC for personal injury to myself or damage to my property. This obligation is binding upon me, my heirs, and personal representatives and assigned.

Participant Printed Name: _____ Dated this _____ day of _____ 20____

Participant Signature: _____ Dated this _____ day of _____ 20____

For participants under the age of 18, a parent or legal guardian's signature is required. If the parent or legal guardian is not present on the days the participant is participating, this document must be notarized by a notary public.

I, _____, hereby give my permission for my child, _____, to participate in all activities on both days at Horse Creek XC 2019.

Signature of Parent/Guardian _____ Dated _____ / _____ / _____

Printed name of Parent/Guardian _____ Dated _____ / _____ / _____

Subscribed and sworn to me this _____ day of _____, 20____.

Notary Public for the State of Montana residing at: _____

My Commission Expires: _____