
Masters MX - 2024

I, _____, apply for participation in the Masters MX Series awards program in 2024.

Name: _____

Address: _____ City/State/ZIP _____

Email: _____ @ _____ . _____ Telephone: () _____ - _____

AMA #: _____ Date of Birth: ____ / ____ / ____ Age: _____

| Class (check one) | Riding # | Bike Brand | Entry Fee Per Class |
|---------------------------|----------|------------|---------------------|
| 25+ A[] B[] C[] | | | () \$25 |
| 35+ A[] B[] C[] | | | () \$25 |
| 45+ A[] B[] C[] | | | () \$25 |
| 50+ A[] B[] C[] | | | () \$25 |
| 55+ A[] B[] C[] | | | () \$25 |
| 60+ A[] B[] | | | () \$25 |
| 65+ | | | () \$25 |
| 70+ | | | () \$25 |
| Women | | | () \$25 |
| Open A[] B[] C[] | | | () \$25 |
| 250 B[] C[] | | | () \$25 |
| Unlimited B/C | | | () \$25 |
| 2-Stroke Open | | | () \$25 |
| Beginner ** see below | | | () \$25 |
| Beginner 30+ ** see below | | | () \$25 |
| Classic 1976-1999 | | | () \$25 |

Total fee: \$ _____

** **Beginner riders of any age must be 1st year riders with AMA membership started 9/1/2023 or later.** **

Terms of Participation - By signing this application, I hereby release, discharge, and agree to hold harmless all members, clubs, organizations, promoters, officials, participants, land owners, and others acting in their support from any and all liability while participating in motorcycling events or while upon, entering, or departing from the premises. I assume all risk of loss, damage, or injury (including death) that may arise from my participation in such events or activities. I further acknowledge and confirm my understanding that Masters MX Series is not a club, organization, race promoter, or any other form of structured organization. It is strictly a group of riders who want to enjoy racing motocross and are pitching in for year-end awards for our own enjoyment. My contributions as shown above are strictly for participation in year-end series awards, and my eligibility is determined by the postmark date of my application.

Signature: _____ [signature confirms understanding of participation terms]

Make checks payable to Tim Titcomb/Masters MX. Return completed application form to:

Masters MX Series

12800 MD 144 P.O. Box 33

West Friendship, Maryland 21794-0033

Email: MastersMX@verizon.net

Web Site: www.mastersmx.org