

2020 New England Sports Committee Moto-X Application

For office use only
CLASSIFICATION RIDER #



NESC PO BOX 609 North Berwick, ME 03906

Renewal () 2019 RIDER # _____ New Applicant () Number Preferences _____

Transponder # _____ Bike Brand: _____

Membership fees do not include the transponder. All members must provide us with the Mylaps number before we process your application. If you do not own a transponder you must order one at www.mylaps.com. You must have one to ride with NESC. We do not rent transponders to members.

Membership Fees: Mail or Online: Before 1/31/20 \$75.00. Additional members per household \$50.00
After 1/31/20 \$100.00. Additional members per household \$75.00

To retain your 2019 Number proper forms and fees must be postmarked by January 31, 2020.

~Copies of birth certificates/driver's licenses are only required for new applicants

~All youth riders (18 and under) will be assigned numbers followed by a "y". You must use the "y" as part you're your number & it must appear on your bike plates. If your NESC card has a letter after the number, then you MUST use it.

PLEASE PRINT (We must be able to read all information on this form)

First Name _____ Middle Initial _____ Last Name _____

Mailing Address _____ Date of Birth (m/d/yy) _____

City _____ State _____ Zip Code _____

Home Phone () _____ Cell Phone () _____

E-Mail Address: _____

What classes do you plan on riding in 2020?

() 50cc/65cc () 85cc 9-11 () 85cc 12-15 () Supermini () Youth A () Youth B () Youth C () 25+ A/B/C () 30+ A/B/C
() 40+ A/B/C () 45+ Open () 50+ Open () 60+ Open () Open Expert () Open Amateur () Open Novice () 250/450 Pro

What is the highest rider classification you have held in the N.E.S.C? _____

What year? _____ Last riding number(s) _____

If you ride/rode at non-NESC events, what classification and organization(s) do/did you ride with, please explain.

The promoters and or the New England Sports Committee do not provide medical insurance coverage. Each participant must provide his/her own and must show written proof of such coverage in order to be eligible to ride.

EMERGENCY INFORMATION

Name _____ Relationship _____ Telephone: () _____
Address: _____
City: _____ State: _____ Zip Code: _____

I agree to conform to and comply with all rules set forth by the New England Sports Committee ("NESC") and promoting organizations. I hereby release the NESC, its officers, members, agents, representatives and officials. All events officials, and all promoting organizations and their respective members, officers and officials, the owner (s) of the premises, or any officers thereof, and other riders and mechanics, from any and all liability, loss, damage, costs, claims and or causes of action, including but not limited to all bodily injuries and property damage arising out of my participation in any event sanctioned by the NESC, and I assume responsibility for all expenses for physicians, ambulances, hospitals and other medical expenses and any other loss or injury to me and or personal property which I may sustain by reason of my participation in any NESC sanctioned event.

Signature of rider: _____

Signature of parent: (if rider is under the age of 18) _____

False or misleading statements and or answers on this or any other entry or NESC form(s) may result in rider suspension and or disqualification.

All information on this form is for the sole use of the New England Sports Committee & shall not be disclosed or used for any other purpose without express written consent of the NESC