



2012 ECEA HARE SCRAMBLE Number Application

This Application is for a Yearly Riding Number and Transponder for use in the ECEA Series
NEW TRANSPONDERS WILL GIVEN TO ALL RIDERS IN 2012, These are NEW Stick on Style.

If You have a MotoTally/NEPG New TAG Check here

NEW FEE \$30.00

Name: _____

Address _____

City _____ State _____ Zip _____

DOB _____ Age _____ Phone _____

Emerg Contact: Name _____ Phone _____

Email _____

AMA _____ ECEA Club _____

Bike make _____ CC/model _____

CHOOSE A RIDING NUMBER (no letters) 16 thru 2000, 1-15 reserved for overall riders.

1st choice 2nd choice 3rd choice

Choose your class – Only pick ONE

ADULTS

AA B200

A200 B Open 201+

A Open B 4 Stroke

A 4 Stroke B Vet 30+

A Vet 30+ B Senior 40+

A Senior 40+ B Super Sen. 50+

A Sup. Sen. 50+ Masters 60+

School Boy 12-13 Big Wheels and 125 2stroke
14-16 Big Wheels and up to 250cc 2&4 Stroke

Grand Master **Women**

Sportsmen **C200**

C Open 201+ **C 4 Stroke**

C Vet 30+ **C Senior**

YOUTH SERIES

50cc

50cc 4-6 OI, XR **50cc 7-8 OI, XR**

50cc 4-8 Open, LC, Any 50 mini

PeeWee

7-10 Trail 0-110 4 stroke, 0-80cc Autos

7-9 65 cc

Youth

14-15 Super Mini 0-112 2strk , 150R

12-13 Super Mini 0-112 2 strk, 150R

13-15 85cc 2 Stroke, 4 strke, NO 150R

10-12 85CC 2 Stroke. 4 strke, NO 150R

11-15 4 Strokes, NO 150R

10-11 65 cc

11-15 Girls Any legal AMA Mini.

RELEASE AND INDEMNITY AGREEMENT

In consideration of being granted an amateur rider number and in consideration of being permitted to enter competition events sanctioned by the American Motorcycle Association (AMA) and coordinated by the East Coast Enduro Association (ECEA), I hereby give up all my rights to sue or make any claim whatsoever against the American Motorcycle Association and its districts organizations, the promoters, sponsors and all other persons or organizations conducting or connected with this event for a injury to property or persons I may suffer, including injury or death, whether such injury arises while I am preparing for or participating in the event or while I am upon the event premises.

I know the risks of danger to myself and my property while participating in the event and while upon the event premises and relying upon my own judgment and ability, assume all such risks of loss and hereby agree to reimburse all costs to those persons or organizations connected with this event for damages incurred as a result of any injury that I or receive. I hereby certify that I assume all responsibility for charges, premiums and taxes if payable on any funds that I may receive as a result of my competitive activities, including without limitation social security taxes, unemployment insurance taxes, compensation insurance, income tax, and withholding taxes.

I understand that ECEA events are subject to AMA rules. It is understood and agreed that in the event that I am injured from whatsoever cause during an event authorized and operated under AMA/ECEA rules, I herewith consent to and authorized first aid and ambulance service as provided by the sponsoring club or property owners, and further to hold all parties harmless from any consequences of said aid.

Sign _____ Date _____

Print _____

Use ink only. I have read and understood this application and indemnity agreement. I hereby make oath and say that to the best of my knowledge and belief that all statements set forth in this document are true and correct.

NOTICE for riders less than 18 years of age: In accordance with Pennsylvania and New Jersey laws, this application must bear the notarized signature of both parents or a guardian. (Both living parents and/or legal guardians must sign below.)

Sign _____ Date _____

Print _____

Sign _____ Date _____

Print _____

Notary Public

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

Sign _____ Date _____

Print _____

Mail application and CHECK \$30 to
ECEA Hare Scramble Numbers
C/O Lisa Soudas
341 Main St
Dupont. PA 18641