## 2025 SKRA MEMBERSHIP APPLICATION (January 1– December 31)

## **Membership Plans**

Name	Single Membership \$140						\$	
A. CONTACT INFORMATION:  Name  (City/State	Family Membership <sup>1</sup> \$240						\$	
Name	<sup>1</sup> Family Membership no longer hav	e to be under	the same	e househol	d			
Name								
City/State	A. CONTACT INFORMATION:							
Email   Phone # (								
Phone # ( )					Zip Code			
Cell B. DRIVERS (List all family members who will be drivers):  Name	Email				DI "/ )			
Name					Pnone # ( )_			work
Kart # Desired (if available): (1st) (2nd) Class	•		will be	arivers):	D-1	,	,	
Name								
Kart # Desired (if available): (1st) (2nd) Class	· · · · · · · · ·							
Name								
*Attach copy of birth certificate for minors under the age of 18  C. FAMILY MEMBERS JOINING SKRA (NON DRIVERS):  Name DOB/ Relationship  Name DOB/ Relationship  Name DOB/ Relationship  THE FOLLOWING MUST BE FILLED OUT FOR APPLICANTS UNDER 18 YEARS OF AGE  I, undersigned, do hereby state that age(s) is in apparent good health and physically able to participate in the strenuous activities of kart racing at sea level and altitudes up to 7000 feet with such activities further stressed by exposure to conditions of humidity and temperatures. Further, it is also stated that the above-named minor is not subject to fainting, loss of balance, loss of muscular coordination, and in general free of other physical ailments that could be aggravated by the stress of driving in kart competition events thereby placing himself, competitors, spectators, and others in attendance in jeopardy of injury. Further, pursuant to the best interests of the above-named minor, competitors, spectators, and other attendants at kart competition events, there is no intent to conceal a possible condition when such revelation would be ample cause for SKRA to withhold the issuing of membership, or in any way ratify the participation of said minor in karting events sanctioned by SKRA  Applicant Signature  All information contained in this application for membership is true and correct. Applicant understands that motor racing can result in personal injury or death. Applicant accepts these risks associated with this form of motor competition and by signing this application, agrees not to sue or hold liable Spokane Kart Racing Association, Northwest Karting Association, Tag Racing International, its owners, board members, officials, staff, sponsors, promoters, or lessees.  Signature of Applicant  If applicant is a minor under 18 years of age, a Minor's Release must be signed and a photocopy of minor's certified birth certificate must be submitted with this application to r								
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Name	.,		_					
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Signature of parent or guardian Date			ior sincic	use must i	e signed and a photocopy c	, minor 3	certifica birtir	er illicate mast be
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