

IMCA COMPETITOR'S LICENSE APPLICATION

2016

New Member Renewal

- | | |
|--|--|
| <input type="checkbox"/> Modified Driver..... \$115 | <input type="checkbox"/> Hobby Stock Driver..... \$85 |
| <input type="checkbox"/> Late Model Driver \$135 | <input type="checkbox"/> Sport Compact Driver \$60 |
| <input type="checkbox"/> Sprint Car Driver..... \$105 | <input type="checkbox"/> Associate/Crew Member (Optional) \$60 |
| <input type="checkbox"/> Stock Car Driver \$95 | <input type="checkbox"/> Minor 14-17 (Additional Fee)..... \$50 |
| <input type="checkbox"/> Northern SportMod Driver \$90 | <input type="checkbox"/> International (Additional Fee/Outside of Continental US) \$50 |
| <input type="checkbox"/> Southern SportMod Driver..... \$90 | |

IMCA membership for 2016 includes a \$50,000 excess medical insurance policy (\$5,000 deductible) which covers you at any IMCA sanctioned event. This excess medical coverage goes into effect after the \$5,000 deductible has been met, per the terms and conditions of the policy, as a result of an IMCA sanctioned racing accident, up to \$50,000. This excess medical coverage is over the track insurance and any other valid and collectible insurance that you, the IMCA member, may have. A \$5,000 accidental death, dismemberment and paralysis policy is also included for IMCA sanctioned events, or for travel to or from IMCA sanctioned events. The policy period is from 1/1/16 to 12/31/16.

PLEASE PRINT CLEARLY

Driver's Name: _____ Spouse Name: _____

Street Address: _____ P.O. Box: _____ Car #: _____

City/State/Zip: _____ Jacket Size: _____

Primary Phone Number: _____ Secondary Phone Number: _____

Cell Phone Number: _____

Member ID Number (5 digit number on license, if prior member): _____ Driver's Date of Birth: _____ Gender: Male Female

E-mail (required if available): _____

Will you be running a crate motor? YES NO

By submitting this application upon acceptance I agree to abide by all IMCA rules and regulations. (As stated on the back of this form.)

Driver's Signature: _____ Date _____

IMCA OFFICE
USE ONLY

Date Rec'd _____

Check # _____

Amount \$ _____



International Motor Contest Association

PO Box 921, Vinton, Iowa 52349

319-472-2201 • Fax 319-472-2218 • raceimca@imca.com

America's Premier Sanction

"I do agree, by signing this IMCA competitor's license application form, that I will abide by all the rules and regulations set forth by IMCA including, but not limited to the following:

- 1. I have, or will have, familiarized myself with all the IMCA rules and regulations, including car specifications and safety rules, and I specifically agree to abide by all the IMCA rules.*
- 2. I agree that I shall be the sole spokesperson for myself, the car owner, and the crew in all matters pertaining to compliance with the rules and regulations and I agree and understand that I am responsible for the conduct of my crew.*
- 3. I agree and understand that the burden of proof will rest upon me to show that I am in compliance with all of the IMCA rules and regulations, and I understand violation of various rules can result in a fine, suspension and loss of all national, regional, state and all local track points.*
- 4. I agree to appropriately use all required decals and patches and I understand that failure to do so may result in loss of points and forfeiture of all associated contingencies, awards or cash.*
- 5. I agree that all decisions of IMCA race officials, or track officials, regarding the interpretation and application of the IMCA rules, and the scoring of positions, shall be non-litigable. I further covenant and agree that I will not initiate any type of legal action against IMCA, or an IMCA promoter, to challenge such decisions, to seek monetary damages, to seek injunctive relief or to seek any other kind of legal remedy. I understand that if I pursue any such legal action, which violates this provision, then I expressly agree to reimburse IMCA or the IMCA promoter, for all of its attorney's fees and costs in defending against such legal action.*
- 6. I also agree to release all advertising and promotional rights to my name, car and likeness to IMCA and its sponsors.*
- 7. I understand that all points, awards and money earned will be paid to the driver.*
- 8. I further understand that there is no express or implied warranty of safety resulting from publication of compliance with the IMCA Late Model, Modified, Sprint Car, Stock Car, SportMod, Hobby Stock or Sport Compact rules and that they are intended as a guide for the conduct of the sport and are in no way a guarantee against injury or death to participants, spectators or others.*
- 9. I also understand that a portion of my annual licensing fee is for a one year subscription to the Inside IMCA newsletter. (additional \$50 fee outside of Continental US)*
- 10. I certify that at the time of signing this application, I meet the minimum age requirements, and that all of the information on this application is correct and I will be held accountable if it is not.*

Make Checks Payable to IMCA

P.O. Box 921 • Vinton, Iowa 52349 • Phone: 319-472-2201 • Fax: 319-472-2218 • E-mail: raceimca@imca.com



IMCA newsletter subscription is included with your membership dues. Non-Member subscription rate — \$34.95 for 12 issues (\$50 more outside of Continental US)