

## **2023 MEMBERSHIP APPLICATION**



NEW MEMBERSHIP RENEWAL HOW DID YOU HEAR ABOUT BKC?		
BKC MEMBERSHIPS - Individual - Family - (\$100 per year)		\$
COMPETITION DRIVER FEE (\$25.00 per driver - number of drivers x \$25.00 each) \$		
TOTAL MEMBERSHIP DUES AND DRIVER FEES DUE BADGER KART CLUB (for 1 year) \$		
MEMBERSHIP NAME		
ADDRESSC	ITY S	TATE ZIP
HOME PHONE ()BUSINESS PHONE (	_)E-MAIL	
FAMILY MEMBERS INCLUDED IN MEMBERSHIP		
DRIVER'S INFORMATION		
DRIVER'S NAME		
CLASSREQUESTED		OU RACED KARTS BEFORE (Y/N)
TRANSPONDER #		
DRIVER'S NAME		
CLASSREQUESTER		OU RACED KARTS BEFORE (Y/N)
TRANSPONDER #	-	
DRIVER'S NAME	DA1	TE OF BIRTH
CLASSREQUESTER	NUMBER HAVE YO	OU RACED KARTS BEFORE (Y/N)
TRANSPONDER #	-	
DRIVER'S NAME	DA1	TE OF BIRTH
CLASSREQUESTED	NUMBER HAVE YO	OU RACED KARTS BEFORE (Y/N)
TRANSPONDER #	-	
RELEASE OF LIABILITY		
Whereas the undersigned desires to participate in practice and racing of Karts at Badger Raceway, located in Ottawa, Wisconsin; it is certified and agreed as follows:  That I agree to all the rules, regulations and terms prescribed by the World Karting Association, International Kart Federation and Badger Kart Club, and that I am bound thereby.		
That I, for myself and my heirs and assigns, release the above-mentioned raceway and organizations, their officers, agents and assigns, and that I further release for myself, my heirs and assigns, their officers, servants and agents, and any and all persons with whom I have contracted with reference to use or lease of the grounds on which the above activities are to be held, all from personal injury or from property damage sustained by me.		
I further agree to hold harmless Badger Kart club, their officers, agents, and any and all persons with whom I have contracted with reference to sue or lease of the grounds on which the above activity is to be held and indemnify said party or parties for any personal injury, property damage or other loss to my person or property or to any other persons or their property from any cause whatsoever.		
That I further agree to observe all laws, state and municipal, or any other public authority, during participation in the above activity and in coming to and leaving said activities and while on any property or public roadway in connection therewith.		
SIGNED WITNESSE	:D	DATE
IGNEDWITNESSED		DATE
SEND FORMS TO:	Badger Kart Club PO Box 18 Dousman, WI 53118	
FOR OFFICE USE ONLY DO NOT WRITE BELOW THIS LINE		
EMT FORM MINOR RELEASE	AGE VERIFICATION (BIRTH C	ERT)
DATE RECEIVED INITIALS		
PAYMEMT: CASH CHECK CHECK NUMBER		