

**WISCONSIN GARDEN TRACTOR PULLERS INC. MEMBERSHIP APPLICATION AND LIABILITY
RELEASE FORM**

Name: _____ Age: _____ No. of Yrs Pulling: _____
 Address: _____ Phone Number(s): _____
 City: _____ State: _____ Cell: _____
 Zip Code: _____ Email: _____

Classes to choose from:

Stock=(S) Pro Stock=(PS) Lt. Super Mod=(LSM) Open Super Stock=(OSS) Unlimited Outlaw=(UO)
 Lt Pro Mod=(LPM) Hvy Pro Mod=(HPM) Hvy. Super Mod=(HSM) Outlaw=(O) Hvy Unlimited Outlaw=(HUO)

<p>1st Tractor: Class(es): _____</p> <p>Tractor Name: _____</p> <p>Tractor Make & Model: _____</p> <p>Engine Make & Size: _____</p> <p>Other Tractor Info (fuel, modifications): _____</p>
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<p>2nd Tractor: Class(es): _____</p> <p>Tractor Name: _____</p> <p>Tractor Make & Model: _____</p> <p>Engine Make & Size: _____</p> <p>Other Tractor Info (fuel, modifications): _____</p>
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Misc. Information (Owner/Builder, Sponsors, Awards, Championships, etc): _____

Waiver: (All Drivers must sign and Parent or Guardian must sign for minor child)

I agree to indemnify Wisconsin Garden Tractor Pullers, Inc. (Club) and all of its related organizations (Promoters and Weight Transfer Machine Owners/Operators), directors, officers, and volunteers, and hold same harmless from and against any and all damages, liabilities, costs, and expenses (including but not limited to attorney's fees) which may be incurred as a result of my participation in any Club event or activity.

I agree that by signing this form I release and discharge Wisconsin Garden Tractor Pullers Inc., its directors, officers, members, owners/operators of the weight transfer Machine, and Promoters of W.G.T.P. pulls from any and all known or unknown damages, injuries, losses, judgments and/or claims from any causes whatsoever, that may be suffered by entrants, family members, or guests while attending or participating in said events. I also understand that each participant will be solely responsible for his/her own vehicle and personal property.

I state that I am of lawful age and legally competent to sign this document; that I understand the terms herein; and that I have signed this document as my own free act.

Child's Name (print): _____ Relationship: _____

Driver/Parent Name (print): _____ Signature: _____

Dated: _____ Full Membership Fee Paid \$ _____ Trial (One Day) Fee Paid \$ _____

Accepted on behalf of W.G.T.P. INC. by: _____ Title: _____

Date: _____