



Membership Registration 2023

Cost \$75

Car Number	
Hard Card No.	

Please Print Information-

Owner Name: Last _____ First _____ MI _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Emergency Contact: _____ Relationship: _____

Emergency Phone: _____

Driver Name: Last _____ First _____ MI _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Emergency Contact: _____ Relationship: _____

Emergency Phone: _____

Payment of fee can be made by VENMO **OR** Check made payable to:

MID-ATLANTIC SPRINT SERIES, LLC.
P.O. BOX 1184
ELMER, NJ 08318



Do not write in this box

Date Fee Paid:	Check #:	Cash:	License #
Approved by :	VENMO:	IMCA # :	

II Section Two: PLEASE READ CAREFULLY BEFORE SIGNING

In consideration of being permitted to join Mid-Atlantic Sprint Series LLC and being permitted to participate in or be a spectator at Mid-Atlantic Sprint Series LLC events during 2023 I hereby:

1. Release, waive, discharge and promise not to sue Mid-Atlantic Sprint Series LLC, any of its official, any of it members, any of its sponsors, or car owners, drivers, pit crews, for personal injury or property damage which I sustain during 2023 arising out of an Mid-Atlantic Sprint Series LLC event, whether the loss is caused by the negligence of Mid-Atlantic Spring Series LLC or its members. This does not waive right of suit in the event that an action is termed criminal within the jurisdiction of applicable law.
2. Agree to indemnify and hold harmless Mid-Atlantic Sprint Series LLC, its officials and members for any loss, liability, damage, or cost which may incur due to my presence at a Mid-Atlantic Sprint Series LLC event, whether I am competing, officiating or observing a Mid-Atlantic Sprint Series LLC event.
3. Assume the risks inherent in automobile racing and assume responsibility for the bodily injury or property damage which those risks can cause.
4. Reserve to Mid-Atlantic Sprint Series LLC and its members and officials, any rights to publish, produce, copyright, duplicate, reproduce upon hats, tee-shirts, and other such novelty concession items, written articles about me, photos and drawings of my likeness or of my racecar. This does not prohibit me from promotional products, nor does this allow Mid-Atlantic Sprint Series LLC to take any proceeds from material produced by me, unless marketed by Mid-Atlantic Sprint Series LLC.
5. I understand that I will be entitled to benefit of the Competitor Accident Insurance policy procured by the Speedway for accidental injuries or death. The coverage of said policy shall constitute the limit of liability of the Speedway for such injuries occurred to me in the event, provided proper notification of such occurrence is filed with the Speedway. It is understood that the policy held by the track is secondary insurance. The Mid-Atlantic Sprint Series LLC membership fee does not include any insurance policy
6. Governing Law. In the event of a dispute arising under this Agreement, it is agreed between the parties that the law of the State of New Jersey, Mercer County will govern the interpretation, validity and effect of this agreement without regard the place of execution of place of performance thereof.
7. I certify that I am an independent contractor, assuming all responsibility for monies received as a result of my activities with Mid-Atlantic Sprint Series LLC including income taxes. I hereby certify that any membership granted hereunder is granted for the sole purpose of enabling me to participate in the furtherance of any enterprise to with, a race, or other motorsports related activity. My presence in, about or in-route to or out of any premises where Mid-Atlantic Sprint Series LLC sanctioned events are presented in furtherance of that Mid-Atlantic Sprint Series LLC event.
8. By signing below, I agree to follow all the rules and regulations and responsibilities as in IMCA, Racesaver, and the 2023 Mid-Atlantic Sprint Series LLC Waiver and Rules. I hereby release the officials of Mid-Atlantic Sprint Series LLC from damages resulting from their decisions and/or interpretations of rules.
9. I have read the forgoing and understand its contents and agree that if any of the paragraphs or provisions of this contract are deemed illegal, the rest of the document shall stand in full force and effect.

Signature: _____ Date: _____

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type.
Specific instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
			-			-			
OR									
Employer identification number									
		-							

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
------------------	----------------------------	--------