

In order to speed up the completion of the necessary 2024 New Hope Automobile Show / Philadelphia Region Sports Car Club Of America Fun Road Rally paperwork on the morning of the

Road Rally, we thought it would be a good idea to provide the forms ahead of time in downloadable format, that way you can print and complete the forms at home and bring them to the Rally.

ABSOLUTELY REQUIRED: PRINT ALL FORMS IN COLOR!

In case you don't have access to a color printer or forget your forms at home, don't worry, we'll have more at the check-in desk on the morning of the Rally.

Here are the instructions for each of the three forms on the following pages.

The SCCA 2024
Membership Application:
There must be one
completed 2024 SCCA
Membership Application form per
Rally Car occupant, adult and
minor alike. Current Philadelphia
Region SCCA Members need
not fill out this form, but
must provide proof of current
membership.

- Leave the gray area blank
- Check the "Trial Member \$Free" box
- Check the appropriate box if this is your first Trial Membership
- Check the box that best describes your participation in the Road Rally
- Fill out the Applicant Information section (phone, email, and DoB optional), check the red checkbox, sign and enter date of signature
- Leave the payment section blank

The 2020 SCCA Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement: This waiver must be signed by each Rally Car adult occupant. The form is designed so that one form can cover all adult Rally Car occupants. Rally Car occupants who are minors should NOT sign this waiver but should sign the minor waiver provided hereinafter.

- At the upper right corner, enter date when form was signed
- Each adult Rally Car occupant: Print name and sign on a separate line at the bottom; leave "Member#" and "Duties" columns blank
- Leave box at the bottom of form blank

The 2020 SCCA Annual Parental Consent, Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement [Combined With] Annual Minor's Assumption of Risk and Release and Waiver of Liability: If a minor will be an occupant of a Rally Car, both pages of this form must be completed.

- BOTH PARENT(S) and/or GUARDIAN(S) of each minor occupant of a Rally Car must print, sign and date the Parental Consent form where indicated at the bottom of the form AND print the name and age of the minor occupant; leave the SCCA Official's sections blank
- Each minor occupant of a Rally Car must complete the Minor's Assumption of Risk form with signature, printed name, date of signature and current age; leave "Member#" blank; leave the SCCA Official's sections blank
- PLEASE PAY ATTENTION TO DETAIL! Unfortunately, any deviation or discrepancy whatsoever regarding the minor forms will disqualify the minor from participation



2024 MEMBERSHIP APPLICATION

Skip the paper form and join at my.scca.com

Complete and return with payment to SCCA Member Services, P.O. Box 299, Topeka, KS 66601-0299. Dues are not deductible as charitable contributions. All membership dues are non-transferable and non-refundable.

Event	Information (To be completed by a Region	n Official)			
Sanction #	Event Date(s)				
Region Name					
□ RallyCross □ Road Raci	ng □ RoadRally □ Solo □ Street Surviv	val □ Track Event/Time Trial			
SCCA Official's Name Member #					
Annual Member \$95 National Dues \$80 + \$15 Region Dues (varies by Region). Term is one year. *Family memberships available at my.scca.com. DISCOUNTS: \$\Begin{array}{c} \$30 \text{ off National Dues for age} \text{ 24 years or younger} \text{ 20% off National Dues for Active Duty/United States Military Veteran. *To initiate, email Membership@scca.com} APPLICANT INFORMATION SCCA Appual Minor Waiver required for Membership and the second s	□ Weekend Member \$20 Term is 5 consecutive days. I AM ATTENDING AS A: □ Driver, limited eligibility check event rules for requirements □ Worker □ Other Purchase earns a \$15 coupon towards Annual Membership if redeemed within 60 days. Maximum of 2 coupons. New York of the Active of the Activ	□ Trial Member \$Free Available for use one time. Limited eligibility & limited participation privileges. Term is 5 consecutive days. □ This is my first Trial Membership I AM ATTENDING AS A: □ Passenger/Ride-along □ First Time Worker Training □ RoadRally Driver □ RoadRally Navigator birth not required for Trial Member.			
	Minors in hot/restricted area, as a driver, worker or pass				
	Date of	DII III			
City, State, Zip Phone					
that shall not be prejudicial to the reputation of the Cl will strive to uphold the SCCA Mission, Vision and Valu ————————————————————————————————————		Date REQUIRED			
membership and amount indicated above only, and is payment with my credit card company; so long as the	s valid for one (1) time use only. I certify that I am an authorized transaction corresponds to the terms indicated in this form.	I user of this credit card and that I will not dispute th			
l yment Method: ☐ Cash ☐ Check ☐ edit Card #	Credit Card Paymen	Exp. CVV#			

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

The New Hope Automobile Show - SCCA Fun Road Rally - 180 W. Bridge St., New Hope, PA

DESCRIPTION AND LOCATION OF SCHEDULED EVENTS(S)

DATE RELEASE SIGNED

IN CONSIDERATION of being permitted to compete, or officiate, observe, work for, or participate in any way in SCCA OR SCCA PRO SANCTIONED EVENTS and/or being permitted to enter for any purpose any RESTRICTED AREA(S) (defined to be any area which requires special authorization, credentials, or permission to enter or any area to which admission by the general public is restricted or prohibited), I, for myself, my personal representatives, heirs, and next of kin:

- 1. Acknowledges, agrees, and represents that he/she has or will immediately upon entering any of such RESTRICTED AREAS, and will continuously thereafter, inspect the RESTRICTED AREAS which he enters, and he further agrees and warrants that, if at any time, he is in or about RESTRICTED AREAS and he feels anything to be unsafe, he will immediately advise the officials of such and if necessary will leave the RESTRICTED AREAS and/or refuse to participate further in the EVENT(S). The undersigned further affirms that he/she has not been diagnosed with, demonstrated any symptoms of or have in any way been exposed to any communicable diseases (including but not limited to COVID-19) within the past thirty days.
- 2. Acknowledges that he/she is aware that by entering the premises and participating in the EVENT(S) that there are risks to me and to those whom I interact of exposure, directly or indirectly, to communicable disease(s), viruses, bacteria, pathogens including but not limited to the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", "COVID-19" and/or any mutation or variation thereof;
- 3. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the promoters, participants, racing associations, sanctioning organizations or any subdivision thereof, track operators, track owners, officials, car owners, drivers, pit crews, rescue personnel, any persons in any RESTRICTED AREA, sponsors, advertisers, owners and lessees of premises used to conduct the EVENT(S), premises and event inspectors, surveyors, underwriters, consultants and others who give recommendations, directions, or instructions or engage in risk evaluation or loss control activities regarding the premises or EVENT(S) and each of them, their directors, officers, agents, employees, representatives, owners, members, affiliates, successors and assigns all for the purposes herein referred to as "Releasees," FROM ALL LIABILITY TO THE UNDERSIGNED, his personal representatives, assigns, heirs, and next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFOR ON ACCOUNT OF INJURY OR ILLNESS TO THE PERSON OR PROPERTY OR RESULTING IN DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENT(S), WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
- 4. HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST they may incur arising out of or related to the UNDERSIGNED'S INJURY, ILLNESS OR DEATH, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
- 5. HEREBY ASSUMES FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, ILLNESS, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENT(S) whether caused by the NEGLIGENCE OF RELEASEES or otherwise.
- 6. HEREBY acknowledges that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED, also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
- 7. HEREBY agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Releasees, INCLUDING NEGLIGENT RESCUE OPERATIONS and is intended to be as broad and inclusive as is permitted by the laws of the State or Province in which the Event(s) is/are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

ALL SECTIONS MUST BE COMPLETED.

PRINT NAME HERE	SIGN NAME HERE	MEMBER#	DUTIES
	I HAVE READ THIS RELEASE		
	I HAVE READ THIS RELEASE		
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SCCA MEMBER NUMBER

SCCA Adult Event Waiver 092020

SCCA MEMBER WITNESS

ANNUAL PARENTAL CONSENT, RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

New Hope Automobile Show / Philadelphia SCCA Fun Road Rally, 180 W. Bridge St, New Hope, PA July 28, 2024 CALENDAR YEAR OF 2024

DESCRIPTION AND LOCATION OF EVENT(S)

IN CONSIDERATION of my minor child ("the Minor") being permitted to participate in any way in the calendar year 2023 SCCA and SCCA Pro Sanctioned EVENT(S) and/or being permitted to enter for any purpose any RESTRICTED AREA(S) (defined to be any area which requires special authorization, credentials or permission to enter or any area to which admission by the general public is restricted or prohibited), lagree:

- 1. I know the nature of the EVENT(S) and the Minor's experience and capabilities, and believe the Minor to be qualified to participate in the Event(s). I will inspect the premises, facilities, and equipment to be used, or with which the Minor may come in contact. IF I OR THE MINOR BELIEVE ANYTHING IS UNSAFE, I WILL INSTRUCT THE MINOR TO IMMEDIATELY LEAVE THE RESTRICTED AREA AND REFUSE TO PARTICIPATE FURTHER IN THE EVENT (S).
- 2. I FULLY UNDERSTAND and will instruct the Minor that: (a) THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and participation in the Event(s) and/or entry into Restricted Areas involves RISKS AND DANGERS OF ILLNESS. SERIOUS BODILY INJURY, INCLUDING PERMÁNENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by the Minor's own actions, or inactions, the actions or inactions of others participating in the Event(s), the rules of the Event(s), the condition and layout of the premises and equipment, and/or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS NOT KNOWN TO ME or that are not readily foreseeable at this time; (d) THE SOCIAL AND ECONOMIC LOSSES and/or damages that could result from those Risk(s) COULD BE SEVERE AND COULD PERMANENTLY CHANGE THE MINOR'S FUTURE.
- 3. I acknowledge that I am aware that by the Minor entering the premises and participating in the EVENT(S) that there are risks to the Minor and to those whom he/she interacts of exposure, directly or indirectly, to communicable disease(s), viruses, bacteria, pathogens including but not limited to the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)". "COVID-19" and/or any mutation or variation thereof.
- 4. I consent to the Minor's participation in the Event(s) and/or entry into restricted areas and HEREBY ACCEPT AND ASSUME ALL SUCH RISKS, KNOWN AND UNKNOWN, AND ASSUME ALL RESPONSIBILITY FOR THE LOSSES, COSTS AND/OR DAMAGES FOLLOWING SUCH ILLNESS, INJURY, DISABILITY, PARALYSIS OR DEATH, EVEN IF CAUSED, IN WHOLE OR IN PART, BY THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW.
- 5. I HEREBY RELEASE, DISCHARGE AND COVENANT NOTTO SUE the promoters, participants, racing associations, sanctioning organizations or any subdivision thereof, track operators, track owners, officials, car owners, drivers, pit crews, rescue personnel, any persons in any Restricted Area, sponsors, advertisers, owners and lessees of premises used to conduct the Event(s), premises or event inspectors, surveyors, underwriters, consultants and other persons or entities who give recommendations, directions, or instructions or engage in risk evaluation or loss control activities regarding the premises or Event(s) and each of them, their directors, officers, agents, employees, representatives, owners, members, affiliates, successors and assigns, all for the purposes herein referred to as "Releasees," FROM ALL LIABILITY TO ME, THE MINOR, my and the minor's personal representatives, assigns, heirs, and next of kin, FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON ACCOUNT OF ANY INJURY TO ME OR THE MINOR, including, but not limited to, death or damage to property, CAUSED OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART, BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE.
- 6. If, despite this release, I, the Minor, or anyone on the Minor's behalf, makes a claim against any of the "Releasees" named above, I AGREE TO DEFEND, INDEMNIFY AND SAVE AND HOLD HARMLESS THE RELEASEES and each of them from ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS, LIABILITY, DAMAGE, OR COST THEY MAY INCUR DUE TO THE CLAIM MADE AGAINST ANY OF THE "RELEASEES" NAMED ABOVE, WHETHER THE CLAIM IS BASED ON THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
- 7. I sign this agreement on my own behalf and on behalf of the Minor.

I HAVE READ THIS ANNUAL PARENTAL CONSENT, RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, UNDERSTAND THAT BY SIGNING IT I GIVE UP SUBSTANTIAL RIGHTS I AND/OR THE MINOR WOULD OTHERWISE HAVE TO RECOVER DAMAGES FOR LOSSES OCCASIONED BY THE RELEASEES' FAULT, AND SIGN IT VOLUNTARILY AND WITHOUT INDUCEMENT.

I HAVE READ THIS RELEASE		
SIGNATURE OF PARENT OR GUARDIAN	PRINTED NAME OF PARENT OR GUARDIAN	DATE
I HAVE READ THIS RELEASE		
SIGNATURE OF PARENT OR GUARDIAN	PRINTED NAME OF PARENT OR GUARDIAN	DATE
I HAVE READ THIS RELEASE		
SIGNATURE OF SCCA OFFICIAL/WITNESS	PRINTED NAME OF SCCA OFFICIAL/MEMBER#	NAME and AGE OF MINOR PARTICIPANT

ANNUAL MINOR'S ASSUMPTION OF RISK AND RELEASE AND WAIVER OF LIABILITY

New Hope Automobile Show / Philadelphia SCCA Fun Road Rally, 180 W. Bridge St, New Hope, PA July 28, 2024

CALENDAR YEAR OF DESCRIPTION AND LOCATION OF EVENT(S)

I have obtained my parent's consent to participate in the above event(s). I understand that I am assuming all of the risks if I get hurt during the event(s), and I state the following:

- 1. Both my parents and I believe I am qualified to participate in the event(s). I will inspect the premises and equipment and if, at any time, I feel anything to be unsafe, I will immediately leave and refuse to participate further in the event(s).
- 2. I understand that the ACTIVITIES OF THE EVENT ARE VERY DANGEROUS and INVOLVE RISKS AND DANGERS OF ILLNESS, MY BEING SERIOUSLY INJURED OR HURT, MY BEING PARALYZED ORKILLED.
- 3. The undersigned further affirms that I have not been diagnosed with, demonstrated any symptoms of or have in any way been exposed to any communicable diseases (including but not limited to COVID-19) within the past thirty days.
- 4. I acknowledge that I am aware that by entering the premises and participating in the EVENT(S) that there are risks to me and to those whom I interact of exposure, directly or indirectly, to communicable disease(s), viruses, bacteria, pathogens including but not limited to the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", "COVID-19" and/or any mutation or variation thereof.
- 5. I know that these risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the event(s), the rules of the event(s), the condition and layout of the premises and equipment, and/or the **NEGLIGENCE** of others, including those persons responsible for conducting the event(s).
- 6. I HEREBY ASSUME ALL SUCH RISKS, EVEN IF THE RISKS ARE CREATED BY THE **NEGLIGENCE** of the promoters, participants, racing associations, sanctioning organizations, or any of its subdivisions, track operators, track owners, officials, car owners, drivers, pit crews, rescue personnel, any persons in any restricted areas, promoters, sponsors, advertisers, owners, and lessees of premises used to conduct the events, premises or event inspectors, surveyors, underwriters, consultants, and any other person or entity who gives recommendations, directions, or instructions, or engages in risk evaluation, loss control activities or sales regarding the premises or events, and each of them, their directors, officers, agents, employees, representatives, owners, members, affiliates, successors and assigns, all for the purposes herein referred to as "Releasees."
- 7. I HEREBY RELEASE, WAIVE, COVENANT NOT TO SUE, AND DISCHARGE, ALL OF THE RELEASEES FROM ALL LIABILITY TO ME, my personal representatives, assigns, heirs, and next of kin, for any and all loss or damage and any claim or any demand on account of any illness or injury to me including, but not limited to, my death, whether caused by the **NEGLIGENCE** of the Releasees or otherwise.

I HAVE READ THE ABOVE ASSUMPTION OF RISK AND RELEASE AND WAIVER OF LIABILITY, UNDERSTAND WHAT I HAVE READ, AND SIGN IT VOLUNTARILY.

I HAVE READ THIS RELEASE			
SIGNATURE OFMINOR PARTICIPANT	DATE		
PRINTED NAME OF MINOR PARTICIPANT	MEMO	BER NUMBER	ACE
PRINTED NAME OF MINOR PARTICIPANT	WEWE	SER NUMBER	AGE
I HAVE READ THIS RELEASE			
SIGNATURE OFSCCA OFFICIAL AVITNESS	PRINTED NAME OF SCCA OFFICIAL	MEMBER NI	IMBER

2024