

HORNETS NEST RACING

MEMBERSHIP APPLICATION

Please Print

Membership Season: _____ Date Fees Paid: _____

Name:

Phone: H _____ W _____ Fax _____

E-mail: _____ Date of Birth: _____ M ___ F ___

Will you be racing with Hornet's Nest? Yes ___ No ___

Spouse Name:

Phone: H _____ W _____ Fax _____

E-mail: _____ Date of Birth: _____ M ___ F ___

Will you be racing with Hornet's Nest? Yes ___ No ___

Address: _____ City: _____

_____ St: _____ Zip: _____

Children (dependents as classified in accordance with current IRS and ABC regulations)

Name: _____ Date of Birth: _____ M ___ F ___

Name: _____ Date of Birth: _____ M ___ F ___

Name: _____ Date of Birth: _____ M ___ F ___

Will any of your children be racing with Hornet's Nest? Yes ___ No ___

_____ Individual membership \$30.00 (Note: does not cover the Crescent racing fee)

_____ Family membership \$40.00 (Note: does not cover the Crescent racing fee!)

_____ I will not be joining Hornet's Nest this year, please place me on inactive status.

MEMBERSHIP IS SUBJECT TO APPROVAL BY THE BOARD OF DIRECTORS AND IS FOR A PERIOD OF ONE YEAR (July 1st to June 30)

AGREEMENT: I do hereby absolve, release and waive any and all liability claims or demands against Hornet's Nest Racing, Inc., it's officers, directors and each and every member thereof, which may arise out of or be related to either any injury, damage, loss, pecuniary loss to either me or any member of my family by reason of such club membership and participation in club sponsored activities. I also understand that my membership in Hornet's Nest Racing, Inc. obligates me to membership in the Crescent Ski Council, Inc. as well.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____ (Parent or guardian's signature if applicant is under 18 years of age)

Make checks payable to: **Hornets Nest Racing, Inc.**

Send application and check to: Hornets Nest Racing, 9317 Hunting Ct., Matthews, NC 28105 or 14675 Hopewell Church Rd. Midland, NC 28107