

Everything you need for joining or renewing an NHRA Jr. Dragster driver is in this packet.

IMPORTANT INSTRUCTIONS FOR PARENTS

- **1.** Review the checklists at the top of the application to determine which documents are required for your child's application.
- All forms must be filled completely.
- **3. Both legal guardians/parents are required** wherever parents' signatures are indicated, and circle their relationship to the child, regardless of with whom the child resides with.
- 4. If sole custody, he/she must check "yes" and initial were indicated on the Parent/Guardian Release and Waiver of Liability and on the Statement of Health. A copy of the court order indicating sole custody is required as well.
- Two documents must be notarized. See additional instructions below.
- **6.** Date of most recent physical (month/year) **must be indicated by the doctor** on the Physician's Medical Clearance.
- **7.** A certified or notarized copy of the child's birth certificate must be provided with all new applications. See additional instructions below.
- A separate packet must be submitted for each child who participates. Photocopies, faxes, and/or scans are not accepted.
- **9.** Fees are due at time of application: See Section 6 of application.
- **10.** Submit this packet with any additional required documentation for processing.

LICENSE RUN REQUIREMENTS

Before beginning license runs: Sections 1, 4, 5, and 6 of the Application for NHRA Summit Racing Jr. Drag Racing League Competition License must be completed, **including notarization of the waiver in section 5**. For specifics on license runs and other testing, see sections 2 and 3 of the Application.

NOTARIZATION AND BIRTH CERTIFICATE REQUIREMENTS

- Two documents must be notarized:
- 1) JDRL Competition License Application, Section 5 2) Parent/Guardian Release and Waiver of Liability.
- Certified or notarized copy of applicant's birth certificate REQUIRED

If not on file with current NHRA JDRL License: **Submit a certified copy**, or if your state's laws allow a notarized copy. Once submitted, this legal document will **remain on file**, and you will not be required to resubmit with each renewal.

QUESTIONS?

Contact NHRA (888) 275-9375 or licensing@nhra.com

JDRLApp_2025-04

NHRA JDRL COMPETITION LICENSE REGULATIONS

The license issued by NHRA is to be used only by the driver to whom it is assigned, and it is restricted to the categories listed on the license. The license is valid until its expiration date or until suspended or revoked by NHRA. The license is intended only to signify that the driver has demonstrated basic qualifications for drag racing classes up to and including the one in which the driver has qualified. The license does not convey a right but rather conveys a revocable privilege to participate in events.

GENERAL

- 1) Minor Release and Waiver must be completed and notarized before any part of the on-track application process begins. Release and Waiver are mandatory to begin the application process. (omit waiver for Jr Comp applicants 18-20 y/o)
- 2) All JDRL license applicants must be a minimum of 5 years of age and may participate through the year of their 18th birthday. Jr Comp eligible 14 years of age through the year of their 20th birthday.
- 3) **Both legal guardians/parents are required** wherever parents' signatures are indicated, and circle their relationship to the child, regardless of with whom the child resides with. In cases of sole custody or guardianship, a copy of the court order must be included in addition to signature and relationship.
- 4) Drivers must be in possession of a permanent NHRA License Certificate and NHRA Membership to be eligible for competition.
- 5) If any test runs are older than one year, all runs must be rerun and completed at an NHRA Member Track.

NEW DRIVER REQUIREMENTS

- 1) Before beginning license runs: Sections 1, 4, 5, and 6 of the application must be completed, including notarization of the waiver in Section 5 and a completed Medical Clearance Letter. Applicants must present completed waiver and medical clearance document to authorized track official before license passes are made.
- 2) The applicant will inform the track manager and/or duly authorized track official of intent prior to any passes. Signatures of observers and times must be filled in after each run.
- 3) The following tests are required:
 - A. Cockpit Orientation: Applicant demonstrates to track official familiarity with all vehicle controls.
 - B. Basic driving test: Applicant demonstrates basic driving skills to track official.
 - C. Track Orientation: Track official orients applicant with track fixtures and applicant demonstrates understanding.
 - D. Applicant will complete six test passes. All test passes will be single runs; no side-by-side runs on test passes. Six passes will need to be approved and signed by two (2) adults who either hold an active NHRA competition license or are employed as a track racing official (for example: starter, race director, tech official).
 - ** For NEW Intermediate & Advanced applicants (ages 10-18) runs 1-3 in Section 3, may be waived by Track Official. **

 ** Track Official must mark "WAIVED" with signature. **

Test runs will be required in the following order:

One tow behind (no timeslip required)
 One moderate run
 One full run

3. One 330' run and stop (no timeslip required) 6. One full run

E. Full runs must be representative of vehicle's performance not to exceed age class performance restrictions.

The class standards are:

TRAINEE (age 5):NOVICE (age 8 and 9):ADVANCED (age 13 to 18):20.00 seconds or slower11.90 seconds or slower7.90 seconds or slowerYOUTH (age 6 and 7):INTERMEDIATE (age 10 to 12):JR COMP (age 14-20)13.90 seconds or slower8.90 seconds or slower6.90 seconds or slower

- F. Official may deny any license in Official's discretion and will deny a license to any participant Official feels cannot handle the vehicle.
- 4) After passing the driver tests, the applicant will complete the license application form in full then mail it along with the original time slips, certified birth certificate, notarized minor waiver & release, and medical clearance form to NHRA.

NHRA LICENSE RENEWAL REQUIREMENTS

The applicant will complete the license application (Sections 1, 4, 5, & 6) form in full then mail it along with, notarized minor waiver & release, and medical clearance form to NHRA.

TRANSFER APPLICANTS

- 1) Two (2) full-pass time slips in class for which you seek a license within the past 12 months at any facility or event.

 ** Side-by-side time trials or elimination time slips accepted. **
- 2) Validation signatures from one (1) Adult & 1 (one) NHRA Official or NHRA Member Track Authorized Official.
- 3) FULL RUNS MUST BE REPRESENTATIVE PERFORMANCE OF THE CATEGORY APPLYING FOR. (Class standards listed above in "New Driver Requirements".)
- 4) After passing the driver test, the applicant will complete the license application form in full then mail it with a copy of their current IHRA license, 2 original time slips, certified birth certificate, notarized minor waiver & release, and medical clearance to NHRA.

Submit Completed Application to NHRA | Please allow a minimum of 3 weeks for processing.

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^{**}OMIT NOTARY SECTION, WAIVER, & BIRTH CERTIFICATE FOR JR COMP APPLICANTS 18-20 YEARS OF AGE**



APPLICATION FOR NHRA SUMMIT RACING JR. DRAG RACING LEAGUE COMPETITION LICENSE



DRAG RACING				DRAG RI	ACING		
NEW NHRA JR. DRAG RACING LEAGUE License applicants	I RENEWAL JR. DRAG RACING LEA			IHRA TRANSFER APPLICANTS ENTLY HOLDS AN IHRA COMPETITION LICENSE			
☐ COMPLETE SECTIONS 1, 2, 3, 4, 5, & 6	COMPLETE SECTIONS 1, 4, 5, &	6	COMPLETE SECTIONS 1,	2, 3, 4, 5, & 6			
COMPLETE 6 TEST PASSES	☐ COMPLETE MINOR RELEASE & V			RIGINAL TIMESLIP DATA; 12 MONTH N	MAX		
ATTACH 3 ORIGINAL TIME SLIPS	☐ MEDICAL CLEARANCE LETTER, C	OMPLETED BY MD OR DO	ATTACH COPY OF CURRE	NT IHRA LICENSE			
COMPLETE MINOR RELEASE & WAIVER	CIRCLE FORM OF PAYMENT (CREDIT	CARD OR CHECK)	COMPLETE MINOR RELE	ASE & WAIVER			
CERTIFIED COPY OF BIRTH CERTIFICATE			CERTIFIED COPY OF BIRT	'H CERTIFICATE			
MEDICAL CLEARANCE LETTER, COMPLETED BY MD OR DO				TTER, COMPLETED BY MD OR DO			
CIRCLE FORM OF PAYMENT (CREDIT CARD OR CHECK)			CIRCLE FORM OF PAYMEN	T (CREDIT CARD OR CHECK)			
SECTION 1 PLEASE CHECK	K HERE IF NEW ADDRESS						
Name:	Date of Birth	::	NHRA Membership	Number:			
Address:							
City:	Parent/Guardian Email:						
State: ZIP:	Parent/Guardian Home Phone #:		Parent/Guardian	Cell Phone #:			
SECTION 2 (ORIENTATIONS AND	TEST MUST BE COMPL	ETED AT AN Ni	IRA MEMBER T	RACK)			
COCKPIT ORIENTATION: APPLICANT MUST D	EMONSTRATE TO TRACK OFFICIAL THAT HE/SHE IS FAMILIA	AR WITH ALL VEHICLE CONTROLS OFFI	ICIAL TRACK OFFICIAL WITNESS SIGNA	TURE:			
Gas Pedal: Brake:	Steering:	Seat Belts:	Shutoff Sw	itch:			
BASIC DRIVING TEST: APPLICANT MUST DE	MONSTRATE BASIC DRIVING SKILLS TO TRACK	OFFICIAL TRACK OFFICIAL WITNE	SS SIGNATURE:				
Acceleration: Braking:	Turning:						
TRACK ORIENTATION: TRACK OFFICIAL OR							
	330' Timing Cone:	Finish Line (1/8-Mile)		Road: Time-Slip Boo	oth:		
SECTION 3 (TEST PASSES MUST	BE COMPLETED AT AN	NHRA MEMBE	R TRACK)				
	LT 2 SIGN-OFFS MUST BI						
1. TOW BEHIND	OFFICIALS (FOR EXAMPL (no timeslip required)	4. 660' MODERATE		MPH:			
Date: Location:	, , ,		Location:				
ADULT/TRACK OFFICIAL 1: Signature	_		L 1: Signature				
Signature CATEGORY / LICENSE NUMBER: LIC				Printed Name LICENSE EXP:			
ADULT/TRACK OFFICIAL 2:		ADULT/TRACK OFFICIA					
Signature CATEGORY / LICENSE NUMBER: LIC	Printed Name ENSE EXP:	CATEGORY / LICENS	Signature SE NUMBER:	LICENSE EXP:			
TRACK OFFICIAL:	· · · · · · · · · · · · · · · · · · ·		· ΙΔΙ ·				
Signature	Printed Name		Signature	Printed Name			
2. 60' PASS (STOP)	(no timeslip required)	5. Full Pass	ET:	MPH:			
DATE: LOCATION:			<u></u>				
ADULT/TRACK OFFICIAL 1: Signature			L 1: Signature				
CATEGORY / LICENSE NUMBER: LIC	ENSE EXP:		SE NUMBER:	LICENSE EXP:			
ADULT/TRACK OFFICIAL 2:	Printed Name	ADULT/TRACK OFFICIA	L 2:Signature	Printed Name			
CATEGORY / LICENSE NUMBER: LIC	ENSE EXP:		SE NUMBER:	LICENSE EXP:			
TRACK OFFICIAL: Signature	Printed Name	TRACK OFFIC	Signature Signature	Printed Name			
3. 330' PASS (STOP)	(no timeslip required)	6. FULL PASS	ET:	MPH:			
DATE: LOCATION:		DATE:	LOCATION:				
ADULT/TRACK OFFICIAL 1:Signature	Proted Name	ADULT/TRACK OFFICIA	L 1: Signature	Printed Name			
CATEGORY / LICENSE NUMBER: LIC				LICENSE EXP:			
ADULT/TRACK OFFICIAL 2: Signature	Printed Name	ADULT/TRACK OFFICIA	L 2: Signature	Printed Name			
CATEGORY / LICENSE NUMBER: LIC				LICENSE EXP:			
TRACK OFFICIAL:			IAL:				

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APPLICATION FOR NHRA SUMMIT RACING JR. DRAG RACING LEAGUE COMPETITION



SECTION 4

APPLICANT'S AFFIRMATION & AGREEMENT: I affirm that I have read and understand, and that I have agreed to and I am bound by all NHRA rules, regulations and agreements including, but not limited to, those contained in the applicable NHRA Rulebook, with specific reference, but not limited to the rules regulations and agreements contained in the Administrative Procedures and Appeals Section of the applicable Rulebook which are incorporated herein by reference. I know that the NHRA Rulebook, including amendments, is available to me online. I agree that participation in any and every aspect of the sport of drag racing is a privilege, not a right, and I wish to participate in accordance with all of the foregoing. I further affirm all of the following: Drag racing is a dangerous sport. There is no such thing as a guaranteed safe drag race. Drag racing always carries with it the risk of serious injury or death in any number of ways. This risk will always exist no matter how much everyone connected with drag racing tries to make our sport safer. Although NHRA works to promote and enhance the safety of the sport, there are no guarantees that such safety measures will ensure my safety. I as the participant always have the responsibility for my own safety, and by participating in drag racing, I am accepting all risks of injury, whether due to negligence, vehicle failure, or otherwise. If at any time I do not accept these risks, I will not participate in drag racing. I understand the NHRA Competition license is issued solely for participation in drag racing on NHRA Member Tracks.

APPLICANT'S MEDICAL ACKNOWLEDGMENT: I do hereby state and affirm that I am in good health and physically and mentally able to participate in all the activities associated with competing in NHRA Drag Racing to the best of my knowledge. I understand that drag racing is strenuous, stressful, and includes all of the risks and dangers that face any vehicle racer. I am free of physical and mental impairments that could be aggravated by participating in NHRA drag racing events, and which could place me, my competitors, spectators and others in attendance in danger of harm. I have not concealed any possible physical or mental condition which could place me, my competitors, spectators and others in attendance in danger of harm. Without limiting the foregoing, I state and affirm that I am not subject to any of the following: fainting, loss of balance, hemophilia or any clotting disorder, loss of muscular coordination, seizures, psychosis, or impaired and uncorrected vision. I state and affirm that I have read and understand the following list of medications and/or substances which are not allowed to be used by any participant: certain blood thinners, amphetamines, cocaine, marijuana (cannabis, THC), opiates and phencyclidine (PCP), and that I am not using any of these substances and will not use any of these substances while I am licensed. I state and affirm that if anything in the foregoing Medical Acknowledgement changes, I will not race unless I have contacted NHRA and received permission to do so, and that I will cooperate in providing any information needed for NHRA to make such a decision, including without limitation undergoing a physical examination or other testing.

Father/Mother/Guardia (Circle One) Father/Mother/Guardia (Circle One) Father/Mother/Guardia (Circle One)	an <u>Date</u>	hese mailings, pu	ut an X in this bo		
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Father/Mother/Guardia (Circle One)	an Date				
Father/Mother/Guardia (Circle One)	an Date				
Father/Mother/Guardia (Circle One)	an Date				
(Circle Offe)	Date	Date			
	D.O.B				
			-		
the identity of the individual whent.	o signed the docu	ument to which th	is certificate is		
County of:					
	, 20	, by			
io appeared before me.					
t	he identity of the individual whent. County of:	he identity of the individual who signed the docu int. County of:, 20, 20	he identity of the individual who signed the document to which thent. County of: of,, 20, by		

OMIT NOTARY SECTION, WAIVER, & BIRTH CERTIFICATE FOR JR COMP APPLICANTS 18-20 YEARS OF AGE

JDRIApp_2025-04 Rev 06/2024



APPLICATION FOR NHRA SUMMIT RACING JR. DRAG RACING LEAGUE COMPETITION



METHOD OF PAYMENT:	ENCLOSED IS A CHECK OR		ULL AMOUNT (paya	able to NHRA. U.S. Fund	ls Only-NO CASH)
	CHARGE MY: VISA M/C	AMEX			
Amount to charge on credit card: \$.00 Card #		EXI	P:	CCV Code: Billing ZIP
Print Name as it appears on the card:		Signature			Code:
COMPETITION LICENSE 8	MEMBERSHIP FEES		FOR OFFICIAL	NHRA USE ONLY	•
-Year Jr. Drag Racing League participar		\$39.00	Rcv'd:	Аитн.	Вү:
-Year Jr. Drag Racing League participar	t member & license fee	ense fee			
-Year Jr. Comp participant member & lic	cense fee	\$90.00	Lic. Code:	DATE ISSUED:	Exp Date:
	TOTAL DU	JE\$00		NFO \$	
NHRA JDRL MEMBERSHIP INCLUDED WITH ALL NHRA JDRL LICENSED FEES			Снеск #:	VS/N	IC/ AX /DR:
(Includes membership kit & excess medical insuran Cover	HRA.COM/INSURANCEINFO.ASPX)	COMP #'s:			
			Nozza		

Mail completed application to respective division office. Please allow a minimum of 2-3 weeks for processing.

LUCAS OIL RACEWAY PARK NATIONAL FIELD OFFICE

STANDARD DELIVERY:

PO BOX 34300 | Indianapolis, IN | 46234

OVERNIGHT DELIVERY:

10267 E US Highway 136 | Indianapolis, IN | 46234 F. (317) 291-4220

NHRA HEADQUARTERS FIELD OFFICE

STANDARD DELIVERY:

140 Via Verde, Suite 100 | San Dimas, CA | 91773

OVERNIGHT DELIVERY:

140 Via Verde, Suite 100 | San Dimas, CA | 91773 F. (626) 466-9089

P. (888) 275-9375 EMAIL ADDRESS: LICENSING@NHRA.COM

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^{**}OMIT NOTARY SECTION, WAIVER, & BIRTH CERTIFICATE FOR JR COMP APPLICANTS 18-20 YEARS OF AGE**

IMPORTANT NOTICE

THIS AGREEMENT SHALL APPLY TO ANY AND ALL NHRA AND NHRA MEMBER TRACK EVENTS OR ACTIVITIES ("EVENTS")

PARENT/GUARDIAN RELEASE AND WAIVER OF LIABILITY ASSUMPTION OF RISK AND INDEMNITY AGREEMENT FOR PERSONS UNDER AGE 18 - THIS AGREEMENT MUST BE NOTARIZED

IN CONSIDERATION of ALLOWING MY BELOW-NAMED MINOR CHILD ("the minor") to compete, officiate, observe, work for, or participate in any way in the EVENT(S) or being permitted to enter for any purpose any RESTRICTED AREA (defined as the advanced staging area, burn out area, competition area, shutdown area, staging lanes, return road area, and any other area within the barriers, fences, and/or structures separating the general public from racing activities), I, THE UNDERSIGNED, on behalf of the minor child, for myself individually and for my children, wards, personal representatives, heirs, and next of kin:

- 1. Represent and agree that I know the nature of the EVENT(S) and the minor's experience and capabilities, and I affirm that the minor is fit and qualified to participate in the EVENT(S).
- 2. Agree and represent that I and the minor have or will immediately upon entering any such RESTRICTED AREAS, and will continuously thereafter, inspect the RESTRICTED AREAS and further agree and warrant that, if at any time, we are in or about RESTRICTED AREAS and believe anything of any nature to be unsafe or unsatisfactory in any way, we will immediately advise the officials of such and will leave the RESTRICTED AREAS and/or refuse to participate further in the EVENT(S).
- 3. HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the promoters, participants, racing associations, sanctioning organizations or any affiliated entities thereof, track operators, track owners, officials, vehicle owners, builders and designers, drivers, crews, rescue personnel, and persons in any RESTRICTED AREA, promoters, sponsors, equipment and parts manufacturers and suppliers, advertisers, owners and lessees of premises used to conduct the EVENT(S), premises and event inspectors, surveyors, underwriters/brokers, 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 for each of them, their directors, officers, agents, and employees, (the "RELEASEES") FROM ALL LIABILITY TO ME, to the minor, and to my children, wards, personal representatives, assigns, heirs, and next of kin, FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMAND THEREFORE ON ACCOUNT OF INJURY TO PERSON OR PROPERTY OR RESULTING IN DEATH ARISING OUT OF OR RELATED TO THE EVENT(S), WHETHER CAUSED BY NEGLIGENCE OF ANY RELEASEE(S) OR OTHERWISE.
- 4. HEREBY AGREE that if, despite signing this Agreement, I, the minor, or anyone on the minor's behalf, makes a claim for loss or damage against any of the Releasees, I AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the RELEASEES and each of them FROM ANY LOSS, LIABILITY, DAMAGE, FEES OR COSTS they may incur arising out of or related IN ANY MANNER TO MY OR THE MINOR'S ATTENDANCE AT OR PARTICIPATION IN THE EVENT(S), AND WHETHER CAUSED BY THE NEGLIGENCE OF ANY RELEASEE(S) OR OTHERWISE.
- 5. HEREBY acknowledge and agree that THE EVENT(S) ARE DANGEROUS and involve the risk of serious injury, death and/or property damage. I also expressly acknowledge that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
- 6. HEREBY ASSUME FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENT(S) whether caused by the NEGLIGENCE OF ANY RELEASEE(S) OR OTHERWISE.
- 7. HEREBY agree that this Parent/Guardian Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement for Persons Under 18 ("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, I agree that the balance shall, notwithstanding, continue in full legal force and effect.

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

LUAVE DEAD THIS ACREMENT

1Parent or Guardian (Signature)	Father/Mother/Guardian (Circle One)	Date	
I represent that I have sole legal custody or am the sole paren (INITIAL) I HAVE READ THIS AGREEMENT	t/guardian		
2. Parent or Guardian (Signature)	Father/Mother/Guardian (Circle One)	Date	
Printed Name of MINOR Participant:	D.O.B		
Address of Participant:			
Printed Name of Parent or Guardian: 1.			
Printed Name of Parent or Guardian: 2.			
A notary public or other officer completing this certificate verifies only attached, and not the truthfulness, accuracy, or validity of that documents		the document to which this	certificate is
State of			
County of			
Subscribed and sworn to (or affirmed) before me on this day of	, 20, by month	parent name(s)	, proved to me
on the basis of satisfactory evidence to be the person(s) who appeared by	before me.		
(SEAL)	Notary's Signature		_

COMPLETE OTHER SIDE

MINOR'S PARTICIPATION AND ASSUMPTION OF RISK STATEMENT

	ALL EVENTS	ALL DATES
	DESCRIPTION AND LOCATION OF EVENT	DATE OF EVENT
hel are dor	ave my parent's permission to participate in this event. ping in some way, being in the "restricted area", or watch a" is a place I need special permission to be in, such as a thicknow if an area is restricted or not, I will ask an event of getting hurt during the event, and by signing my name belower.	ling the event. I understand that the "restricted the race track itself and the area close to it. If I ficial. I understand that I am assuming the risks
1.	My parents (or guardians) and I believe I am qualified a look at the place where this event is being held, and th think ANYTHING is unsafe, I will leave right away and ref	e equipment at this place, and if, at any time,
2.	I understand that the ACTIVITIES OF THE EVENT ARE there is the RISK AND DANGER that I could be BADLY that these risks and dangers can be unexpected. Even this event, I still want to participate.	HURT, PARALYZED OR KILLED. I understand
3.	I know that these risks and dangers may be caused by vortice of people participating in the event, by the rules of the location and equipment, and/or by the NEGLIGENCE people responsible for putting on the event.	event, by the condition and layout of the event
4.	I ASSUME ALL THESE RISKS , EVEN IF THE RISKS CARELESSNESS of the promoters, participants, racing of its subdivisions, track operators, track owners, equi officials, car owners, builders and designers, drivers, pi restricted areas, sponsors, equipment and parts manufal lessees of premises used to hold the events, premises consultants, and any other person or entity who gives a engages in risk evaluation, loss control activities or sales them, their directors, officers, agents, and employees.	associations, sanctioning organizations, or any oment and parts manufacturers and suppliers to crews, rescue personnel, any persons in any cturers and suppliers, advertisers, owners, and so or event inspectors, surveyors, underwriters, ecommendations, directions, or instructions, or
5.	I have read this Statement, I understand it, I have discretely their permission to sign it, and I agree to make this my over	
	I HAVE READ THIS STATEMENT	
	SIGNATURE OF MINOR PARTICIPANT	DATE
	PRINTED NAME OF MINOR PARTICIPANT	AGE

COMPLETE OTHER SIDE

PRINTED NAME OF PARENT OR GUARDIAN

I HAVE READ THIS STATEMENT

SIGNATURE OF PARENT OR GUARDIAN



NHRA JR. DRAG RACING LEAGUE

(Physician's Medical Clearance to Participate in NHRA Jr. Drag Racing must be completed on other side)

Must be completed to process license.

Applicant's Name		Age	☐ Male	☐ Female	Date of birth _	/ /
Address	City		State		Zip	
Father/Guardian Name		Father/Guardian Work phone		Father/G Cel		
Sole Custody/Guardianship (Please circle one)	☐ Yes ☐	No				
If yes, <u>must</u> include copy of court of	order; otherwise,	BOTH parents	/guardians mu	ıst sign.		
Mother/Guardian Name		Mother/Guardian Work phone		Mother/G	Guardian II phone	
Emergency Contact Information:						
Contact		Р	hone Number			_
If medical care is required for authorizes medical care as deen facility providing treatment.	ned necessary by	y first respond	ders and any	-	-	_
Signature of Father/Guardian				Date		
Signature of Mother/Guardian				Date		
Minor's Insurance Provider/Policy	#					
STATEMENT OF MINO	R'S HEALTH A	ND FITNESS	S TO PARTIC	CIPATE - PA	ARENT/GUA	RDIAN
I/We the undersigned parent or is in good health and is physical Jr. Drag Racing to the best of cincludes all of the risks and dang that could be aggravated by parspectators and others in attendato any of the following: fainting seizures, psychosis, or impaired	ly and mentally a our knowledge. ers that face any rticipating in Jr. I ance in danger o , loss of balance,	able to partic I/We unders vehicle racer Drag Racing e f harm, and w hemophilia c	ipate in all th tand that Jr. . This minor is vents, and w vithout limitir	e activities a Drag Racing free of phys nich could pl g the forego	ssociated with is strenuous, ical and mental ace the minor, ing, the minor	competing in stressful, and l impairments , competitors, is not subject
I/We have not concealed any po minor, fellow competitors, spec	= =		lition which co	ould affect th	e safety or wel	ll-being of the
I HAVE READ	THIS STATEN	IENT		Dat	e	
Signature	Fat	ther/Guardiar	1			
	THIS STATEM			Date	e	
Signature	IVIO	ther/Guardia	H			



NHRA JR. DRAG RACING LEAGUE

Physician's Medical Clearance to Participate in NHRA Jr. Drag Racing League

(Statement of Applicant's Health and Fitness to Participate – Parent/Guardian must be completed on other side)

Must be completed and signed by M.D. or D.O.

NOTE: Jr. Drag Racing is strenuous, stressful, and includes all the risks and dangers that face any vehicle racer. For more details, see Statement of Minor's Health and Fitness to Participate – Parent/Guardian on the other side and ask the parent/guardian.

Minor's Name		Age	_ □	Male		Female	Date	of birth _	/	/
Height										
Allergies (if believed relevant by	physician)									
Medications applicant is taking (f believed relev	ant by phy	sician)							
Medical Conditions (if believed r	elevant by physi	ician)								
Other Matters believed relevant by physician:										
I have examined the above minor to clear him or her for participation in NHRA Jr. Drag Racing and state that s/he is physically fit for full participation without any limitations.										
I have administered a complete	physical exam of	of this min	or with	in the p	oast 1	2 month	ıs.			
Date of Physical										
Medical Physician (MD/DO) * Signature	Medical Physic		* NAME, i ype or Pri		DRESS 8	k PHONE NO		ate of Medica		ian
State License #	Dhono ()		Fa 4	, ,						

^{*}Must be signed by MD or DO, other signatures not acceptable.