

RELEASE FORM

NAME:			_ DR LIC#	exp	
PHONE:		EMAIL:			
AGE: BLOOD TYPE:			APPROX. WEIGHT:		
CAR MAKE:			MODEL:		
CLASS: AV	VD 2WD	UNL	YEAR:		
ALLERGIES:					
		AL DISABILITIES (ind			
			PHONE #:		
MEDICAL INS		(if any):	PHONE #:		
EMERGENCY	CONTACT:		PHONE #:		
PAID AMT:	P	PD BY:	PD DA1	ſE:	
The Undersigned e ("the Federation"),	ach voluntarily acce all liabilities, risks,	(EventPro Ol ept, in consideration of the us dangers and perils associated any nature arising from such	se of the facilities of the Cay d with such use and hereby	man Motoring Federation	

The Undersigned each do also hereby agree to indemnify the Federation from any claim, action, liability, loss, damage or suit arising from any act or omission of each of the Undersigned in respect of or in relation to the Undersigned's use of the Federation's facilities.

The Undersigned do further hereby agree to compensate the Federation, it members, officials and sponsors for any loss or damage to any of their property occasioned by willful, negligent, or careless conduct.

SIGNED: _____ DATE: _____

PO Box 1521, Grand Cayman, Cayman Islands KY1-9006 https://caymanmotoringfederation.org/

Inspection Sheet

	Pass	Fail	Notes
Belts/Air Filter/Loose items			
Battery strap/cables & secure			
Pedals			
Seats secure/Seat belts			
Brake pedal system & travel			
Fluids (no leaks)			
Suspension system			
Exhaust System (other noises)			
Undercarriage (leaks or Damage)			
Tires & Wheels & Lugs			

TECH NAME:

SIGNATURE:_____

I, the undersigned, agree to assume all the risks inherent in Motorsports and related activities conducted by the CAYMAN MOTORING FEDERATION. I agree to hold harmless the landowners, all commercial and private sponsors, the CAYMAN MOTORING FEDERATION and its members and officers from any liability and will under no circumstances present any claim for personal injury, property loss/damage or wrongful death. I, in future agree to abide by the rule and regulations set forth by the CAYMAN MOTORING FEDERATION.

NAME (PRINT):_____