

BROUGHT TO YOU BY:





KART RACE ENTRY FORM

Race day: Sat, 25 Nov 2023. 9am - 5pm.

This is a community event with all proceeds going to charity.

Participant Details		
Full Name:		
Gender: Male 🗌 🛛 Female 🗌	Date of Birth:	Height in cm:
Race Category		
Please tick your preferred category		
Standard Category: Age Group	7 🗆 8 🗆 9 🗆 10 🗆 11 🗆 12 🗆	Use Karts provided by HLG: Yes \square No \square
Open Freestyle Category (Use y	our own Kart): 🗌	
Details of Kart: Height	Length	Weight
Parent/Guardian Details		
Full Name:		
Relationship to Participant:		
Address:		
Tel:		

All personal information will be held in strict confidence and will not be divulged to any third party

Please send your completed form (inclusive of the next page) to: **kartrace@harveylawcorporation.com** An email confirmation with payment instructions will follow upon receipt of the signed PDF.



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CONSENT AND LIABILITY RELEASE

I hereby give my consent for the child named below (the "Participant") to take part in the HARVEY LAW GROUP Kart Race (the "Event") in Discovery Bay.

I also confirm that I have read and voluntarily signed this waiver and I confirm my agreement to assume the entire risk of any loss, property damage, illness, injury or death (collectively "losses") that the Participant may sustain or cause as a result of their participation in the Event.

I hereby release and discharge HARVEY LAW GROUP and all persons and entities connected with the Event from any and all claims that may arise as the result of loss, property damage, injury, illness or death to the Participant in the Event howsoever caused to the maximum extent permissible by law.

I hereby authorize HARVEY LAW GROUP the irrevocable, transferable and worldwide rights to publish, use, adapt and to use in perpetuity, any electronic images (including without limitation, photographs and video) that include the participant in connection with any and all exhibitions, public displays, broadcasts, transmissions, internet usage, publications, promotions or advertisements without limitation or reservation in connection with the Event. I agree that the rights granted herein shall be without prior notice or additional compensation to me, and I waive any right that I may have to inspect or approve any such information or materials or any use of them.

I understand and agree that if the Event is cancelled for any reason I will receive a full refund of my entry fee but that no person or entity connected with the Event will be accountable for any additional expenses incurred by me.

I hereby certify that I have read and understand this release and that I fully accept the terms and conditions set forth herein on behalf of the Participant, myself, my representatives, heirs, assigns and next of kin.

By typing your name below, you are signing this application electronically. You understand and agree that your electronic signature is the legal equivalent of your handwritten signature on this application.

Name of Participant:
Name of Parent/Guardian:
Parent/Guardian's Signature:
Date: