

[IFMX Use Only] Membership #: \_\_\_\_\_ PAID: \$ \_\_\_\_\_

## IFMX Membership Application Form



First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Membership Type (check one):

Choose one of the two membership types: single (individual) membership or family membership. Family membership includes 1 head-of-household, children under 18 years old, and spouse. Good standing members pay full dues annually.

- Individual (\$200)
- Family (\$200 + \$50 per additional family member)  # of children under 18 \_\_\_\_\_

### LIST ALL FAMILY MEMBERS TO BE INCLUDED IN FAMILY MEMBERSHIP

	Name	Birthdate	Relation		Name	Birthdate	Relation
1				5			
2				6			
3				7			
4				8			

**Rights and Responsibilities:** Members are considered not in good standing if they fail to renew by the second general membership meeting of the year. Any member whose dues remain unpaid after this date shall be deprived of all privileges of IFMX until such time as the member is again in good standing. Good standing members do have the right to cast one vote per adult member in general elections. Dues are paid for the calendar year, regardless of time of purchase.

I recognize that by becoming an IFMX member, I will abide by the IFMX Constitution and Bylaws, as well as the rules outlined in the IFMX Rulebook. I will attend the required number of general membership meetings and work the required service hours, as outlined in the Bylaws, to maintain status as a member in good standing.

**Waiver:** I hereby release and agree to hold harmless, the Idaho Falls Motocross Association, the promoters, officers, participants, directors, officials, representatives, members, agents and employees of all of them, of any liability, loss, claim and demand, that may accrue from any loss, damage or injury (including death) to my person or property, in any way resulting from, or arising in connection with this event, and whether arising while engaged in competition or in practice or preparation therefore or while upon, entering or departing from said premises while participating or assisting in this event, so voluntarily and in reliance upon my own judgment and ability, and I therefore assume all risk for loss, damage or injury (including death) to myself and my property from any cause whatsoever.

**By signing below, I agree to the terms and conditions of IFMX membership:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

[IFMX USE ONLY]

Meetings Attended:

\$ PAID: \_\_\_\_\_

Member #: \_\_\_\_\_

J	F	M	A
M	J	J	A
S	O	N	D