

2023
Las Vegas Oldtimer's
Club Membership Application

~~~~~ Please **CLEARLY** print information. ~~~~~

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

Spouse (or significant other): \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Bike Brand: \_\_\_\_\_ Riding #: \_\_\_\_\_

**Membership: Please mark one**

\_\_\_\_\_ **Membership (\$30 annually – expires 12/31/23):**  
Membership dues allow participation in club events and required for Int'l race events  
**Includes family members under age 30 that ride "Support classes".**

Please provide Support rider names \_\_\_\_\_  
*80+ and 90+ Riders are FREE!! Please just send in the form and come Race!*

**Class:**  
**(Please circle one)**

**Proof of age may be required.**

To participate in the +30/40+ age classes you **MUST BE** at least 30/40 years old by the date of the event you wish to ride.  
**NO EXCEPTIONS!** All other age classes, your birthday must fall within the calendar year of the age class you wish to participate in.

| <u>+30</u>   | <u>+40</u>   | <u>+50</u>   | <u>+60</u>   | <u>+70</u>   | <u>+75</u> | <u>+80</u> | <u>+90</u> |
|--------------|--------------|--------------|--------------|--------------|------------|------------|------------|
| Master       | Master       | Master       | Master       | Master       | one class  | one class  | one class  |
| Expert       | Expert       | Expert       | Expert       | Expert       |            |            |            |
| Intermediate | Intermediate | Intermediate | Intermediate | Intermediate |            |            |            |
| Novice       | Novice       | Novice       | Novice       | Novice       |            |            |            |

Legal Release:

I, the undersigned, fully understand that at no time will I make a legal or financial claim against, nor will hold responsible, any member of The Oldtimer's Motorcycle Association-Las Vegas, LLC, for any damages to my motorcycle, equipment, or my body, including death. I am and will be accountable for my own actions. I have read and fully understand the above legal release.

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

Checks are made payable to:  
"Oldtimers MX-Las Vegas"  
Please mail to:  
Las Vegas Oldtimers – 2714 Promontory Dr Bullhead City AZ 86429