**

**DRIVER APPLICATION**

|  |  |
| --- | --- |
| NAME | PHONE-EVENING PHONE-DAY |
| STREET | E-MAIL |
| CITY STATE | Emergency Contact  |
| **ZIP** | Emergency Number |

Car Information:

|  |  |  |  |
| --- | --- | --- | --- |
| YEAR | MAKE | MODEL | Street or Race Car? Cage? |

**EXPERIENCE:**

How many track days have you run? \_\_\_\_\_\_\_\_\_ At which tracks?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

With which track groups? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sharing the Car with another driver? (Y/N) Other Drivers Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **(check one)**

***Registration Fee per Driver****:* $ 325 \_\_\_

**Attending: (check applicable dates) June 30\_\_\_**

Full Payment required with signed Application and Waiver forms (checks preferred)

All Credit Card payments may be made at [motorsportreg.com/lappingdays](http://www.motorsportreg.com/events/lapping-days-at-umc-east-utah-motorsports-campus-537171)

**If paying online, BRING signed application and signed waivers to the track, or mail to the following address.**

**If paying by check, send check, signed Application, Liability Waiver, Helmet Waiver, & Tech Waiver to:**

#### Lapping Days, LLC, c/o Bob Read, 7911 Majestic Ridge Dr., Salt Lake City, UT. 84121

You are totally responsible for the safe operation and safe mechanical condition of your vehicle. **The organizers of the Lapping Days Event, track staff and facility providers assume no responsibility in the event of an accident, of any kind, in the course of this event.** If this is of concern to you we recommend that you contact your own personal insurance carrier for advice to determine what coverage would be in effect during this event. Remember that Lapping Days is not a race. It is a driver’s education event meant to improve your awareness behind the wheel and vehicle handling skills.

Submission of this application is your acknowledgement of the above and agreement to attend under these conditions.

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

**GENERAL RELEASE OF ALL CLAIMS AGAINST ORGANIZERS AND PARTICIPANTS OF LAPPING DAYS, LLC PROGRAM AT UTAH MOTORSPORTS CAMPUS**

I agree, as a condition of my participation in the Lapping Days, LLC Driver Development Program at the Miller Motorsports Campus on June 30th, 2016 that I hereby assume the risks of participating in the Lapping Days Program and that I understand that the risks include both serious person injury, including death, and property damage. I understand that the risks and potential injury can result from negligence or carelessness on the part of persons (including myself) who are participating in the event, as well as from dangerous or defective equipment maintained or controlled by persons (including myself) who are participating in the Program.

 I further agree to be fully responsible for my vehicle at all times. I further acknowledge, understand and agree that the Lapping Days, LLC organizers are not responsible for inspection of any vehicles which I may use during the event. In addition, I acknowledge, understand and agree that the Lapping Days, LLC organizers are not responsible for the mechanical condition of any vehicle used during the event and that I am solely responsible for the mechanical condition of any vehicle that I may use in the Lapping Days, LLC and that if any such vehicle has been modified in any way, including but not limited to the addition of a roll bar or roll cage, or modified seat belts or harnesses, that the organizers have not conducted a visual inspection of the vehicle, including any modifications. I assume full responsibility for any and all damages or injuries that may arise as a result of any mechanical failure or use of my vehicle for any reason whatsoever.

 I understand that I may be participating in an event on a racetrack or driving course, which may involve high speed driving situations and/or danger of property damage and/or personal injury to the undersigned, or others, as a result. With that full knowledge, I, on behalf of myself, my executors, heirs, successors, and assigns do hereby release, acquit and forever discharge the organizers and participants, lessors, agents, sponsors, predecessors, successors or assigns (the “releasees”) from any liability, claim, demand, cost, loss or expense, or cause(s) of action of any kind whatsoever, specifically including, but not limited to, claims related in any way to my use of any helmet, either my own or a rental/loaner, which may arise in connection with my participation in Lapping Days, LLC Program or from any injury sustained by me, whatever the cause, and whether or not due to negligence on the part of me or the releasees or anyone else, and I further agree to indemnify and hold harmless the releasees as a result of any such damages or injuries of any kind whatsoever.

 I further agree that any such vehicle will be operated by a fully licensed driver over the age of 18 and that such vehicle is covered by at least the minimum liability and property damage insurance as required by Utah law (non-registered race cars are exempt), which will remain in full force and effect during the Program. I understand that my personal auto insurance may refuse to pay any claims, property or liability, associated with my participation in this Program. I may be personally responsible for any damages to me, my automobile or to others, as a result of my voluntary participation in this Program. I specifically understand and agree that this release fully applies and I assume full responsibility for any and all such damages without any limitation whatsoever.

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Print name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**HELMET ACKNOWLEDGEMENT AND RELEASE**

I (*We*) acknowledge that my (*our*) helmet has met the Snell 2005, 2010, or 2015 standards of the Snell Memorial Foundation of the U.S. Department of Transportation and that it appears, from my (*our*) casual inspection, to be capable of meeting those standards at the present time. I (*we*) acknowledge that the Organizers of the Lapping Days, LLC Program are making no inspection for fitness for use of my (*our*) helmet and that I am (*w*e *are)* relying solely on my (*our*) own judgment in using the helmet in the Lapping Days, LLC Program.

I, on behalf of myself, executors, heirs, successors and assigns, release, acquit and forever discharge the organizers and participants, lessors, agents, sponsors, predecessors, successors or assigns (the “releasees”), from any and all liability, claims, demands or causes which may arise from my wearing of the helmet, or from my attendance at the Lapping Days, LLC Program, or from any injury sustained by me, whether or not due to their negligence.

I represent that my helmet has not previously been worn in a collision or struck by a hard object.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Driver’s Signature) Printed Name Date

**LAPPING DAYS, LLC DRIVER DEVELOPMENT PROGRAM**

**VEHICLE TECHNICAL INSPECTION**

TECHNICAL INSPECTIONS ARE NOT REQUIRED FOR THIS PROGRAM. IT IS STRONGLY SUGGESTED THAT YOU INSPECT YOUR VEHICLE TO DETERMINE WHETHER IT IS IN SAFE OPERATING CONDITION TO PARTICIPATE IN THE LAPPING DAYS, LLC PROGRAM.

Following is a check list suggested by other auto clubs. You may refer to this list when inspecting your vehicle and may wish to have your mechanic use this list when they thoroughly check your vehicle prior to the event. This list is not intended to be a complete list of items to be inspected by merely a guideline of items about which you may be concerned.

|  |  |  |  |
| --- | --- | --- | --- |
| P / F | Fan & drive belts OK, tight no cracks | P / F | Hoses secure & flexible, no cracks/rubbing – no leaks |
| P / F | Engine, transmission & diff mounts solid | P / F | Battery secure, no leaks |
| P / F | Throttle linkage secure, min. 2 return springs | P / F | Two throttle return springs |
| P / F | Front strut mounting & hardware secure | P / F | Fluid levels OK (incl trans & diff), no leaks |
| P / F | CV joints & center support bearing OKNo cracks or tears | P / F | Brake heat performance – check for brake fade & rotor warpage with 3 or 4 hard stops from 60 mph |
| P / F | Tires – even wear, suitable for track driving | P / F | Wheel bearings, ball joints tight |
| P / F | Springs & shocks OK | P / F | Brake pads, shoes, disks & drums OK |
| P / F | Header & exhaust OK  | P / F | Brake fluid flushed – factory service intervals date last flush: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| P / F | No excessive body corrosion | P / F | Steering box securely mounted |
| P / F | Rear unibody subframe & differential mountings secure | P / F | #36 rear subframe mounts & rear toe link bushings not cracked or torn |
| P / F | Pedals securely mounted & firm | P / F | Driver seat & belt in good working orderFactory 3 point belt minimum required |
| P / F | Fire extinguisher mounted in car (optional, but encouraged) | P / F | Passenger seat & belt design & condition, equal to or better than driver seat & belt |
| P / F | Brake lights & flashers working | P / F | Seats securely mounted |
| P / F | Steering wheel play not excessive | P / F | SRS faults cleared |
| P / F | Mirrors securely mounted. At least one inside rearview mirror | P / F | Windows secure & in good condition |
| P / F | Under car valances securely mounted (esp. E36) | P / F | Lug bolts torqued, no cracked or bent wheels |
| P / F | Wiper blades & system function OK | P / F |  |

INSPECTION IS NOT REQUIRED, BUT STRONGLY SUGGESTED. ALL PARTICIPANTS ARE RESPONSIBLE FOR THE SAFE OPERATING CONDITION OF THEIR VEHICLE.

|  |  |
| --- | --- |
| INSPECTED BY *(Mechanic signature and stamp merely indicate the mechanic has made the inspection with the results shown above.)*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE \_\_\_\_\_\_\_\_\_\_\_\_ Pass / Fail? \_\_\_\_\_\_\_\_\_ | Stamp here with mechanic business name or return address stamp. |

**RESPONSIBILITY STATEMENT –**

I understand that the safe condition and operation of the vehicle specified on my technical inspection checklist form is entirely my responsibility, as well as any problems, malfunctions or damage that occur in connection with the operation of the specified vehicle prior to, during and subsequent to the Lapping Days, LLC program.

CAR MODEL, YEAR, COLOR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DRIVER NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DRIVER SIGNATURE DATE