



Our/My minor child _____, born _____ has
(Name of Minor) (DOB)
our/my permission to participate in all Iowa Moto Series/AMA District 22 Club Council, Inc.
events during the 2025 racing season.

In addition, we/I authorize _____ to act as our/my child's
(Name of Adult)
legal guardian. We/I give them permission to sign any event entry or registration form(s) and to
give consent for medical treatment if needed.

By signing this form, we/I understand and acknowledge that motocross racing is a high-risk sport
that can result in serious injury or death. We/I accept full responsibility for any and all risks involved
in participation. We/I release and hold harmless Iowa Moto Series, AMA District 22 Club Council Inc,
event organizers, track owners, sponsors, and any other affiliated persons or entities from any
liability or claims arising from our/my child's participation in these events.

Parent's Name (Print)

Parent's Name (Print)

Parent's Signature

Parent's Signature

Date

Date

ACKNOWLEDGMENT

On this _____ day of _____, 2025, in the State of _____, in the county of _____,
_____, whose identity I verified via a valid form of government-issued
identification (e.g., driver's license, state ID, or passport), personally appeared before me, being the parent(s) or
legal guardian(s) of the minor child named in this document, to be the signer of the foregoing document, and he/
she acknowledges that by signing, he/she agrees to the terms above and gives their permission as stated in the
above section.

(Signature of Notary Public)

(Notary Seal or Stamp Here)

(Commission Expiration)