

## Instructions

This form is designed to be completed online at the CART website [www.cartct.com](http://www.cartct.com).

If you want to complete your renewal using Microsoft Word, use the 2009 CART Membership Renewal Form (Word).doc

If you want to complete your renewal by hand, with a typewriter or by hand, use the 2009 CART Membership Renewal Form (Adobe).pdf

If mailing your form, please send to:

Adam Nogiec  
41 Mohawk St.  
New Britain CT 06053

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This year's renewal form has been modified in the following ways:

- Collect Cell Phone #
- Collect data on Motorsport Areas of Interest
- Collect Member's Areas of Interest Preferences and Experience
- Permit Members to Identify and Make Available Personal Medical Skills
- Expand the Release and Indemnification Agreement Section
- No longer ask for Age
- No longer ask for Work Phone #
- No longer ask for Fax #
- Ask only for information on vehicles to be used in Motorsport
- Make collection of data on occupation / profession optional

Formatted data fields limit data entry to specific areas on the form and, where appropriate, restrict entry to numeric data or specific choices. Text fields will automatically expand to accommodate the entered information.



# CONNECTICUT AUTOCROSS & RALLY TEAM, INC.

Membership Application, Release & Indemnification Form

2009 CART Membership Application Form (Word).doc

Name:	
Address:	
City:	State: Zip: -
Occupation / Profession (optional):	
Home Phone: ( ) -	Cell Phone: ( ) -
Email:	
Emergency Contact	
Name:	Phone: ( ) -

**Membership Type (check the one which applies):** Single (\$30)  Family (\$40)

C.A.R.T. Sponsor (New members need to be sponsored by a C.A.R.T. member in good standing)

\_\_\_\_\_

Family Member Name	Adult (18 or older)
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>
	<input type="checkbox"/>

### Vehicles Currently Owned and Used in Motorsport:

Make:	Model	Body Type	Year

### Member Numbers:

Name	Current #	Desired #	Desired #	Desired #

Other Club Affiliation:



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Motorsport Events in which You Intend to Participate: Please check all that apply:

Motorsport Event	Will Participate	Motorsport Event	Will Participate
Autocross (Sunday)	<input type="checkbox"/>	Rally	<input type="checkbox"/>
Saturday Autocross (aka Test & Tune Autocross)	<input type="checkbox"/>	Track Days (Time Trials)	<input type="checkbox"/>
		Wheel-to-Wheel Karting	<input type="checkbox"/>
Indoor Autocross	<input type="checkbox"/>	Wintercross	<input type="checkbox"/>

Member Activities: Each member is expected to actively contribute to C.A.R.T. activities, operations and events. If you have any questions or are unsure how to fill in this part of the form, please contact a club officer for assistance prior to submitting your application.

**Member Activities**

Please check all that activities in which you would like to contribute.

Please check at least one activity or supply details in Other Member Activities section.

Event Support Area	Interested In	Experienced In
Computer Data Entry / Clerical	<input type="checkbox"/>	<input type="checkbox"/>
Computer Programming / Website Management	<input type="checkbox"/>	<input type="checkbox"/>
Entertainment Programs	<input type="checkbox"/>	<input type="checkbox"/>
Event Publicity	<input type="checkbox"/>	<input type="checkbox"/>
Event Safety	<input type="checkbox"/>	<input type="checkbox"/>
Lot Repair	<input type="checkbox"/>	<input type="checkbox"/>
New Trailer Build	<input type="checkbox"/>	<input type="checkbox"/>
Timing Circuits / Electronic Setup	<input type="checkbox"/>	<input type="checkbox"/>
Track Day Course Work	<input type="checkbox"/>	<input type="checkbox"/>
Trailer Operations / Event Management	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle Technical Inspection	<input type="checkbox"/>	<input type="checkbox"/>

Other Member Activities: Please describe in detail:

**Medical Capabilities**

If you have a currently certified medical capability or if you are a healthcare professional *and* if you would like to make your skills available to C.A.R.T., then please describe your skills in the appropriate detail:



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### **Release and Indemnification Agreement – You MUST read this before signing!**

The undersigned acknowledges and understands that the Connecticut Autocross and Rally Team, Inc. (a.k.a. C.A.R.T.) a non-profit Connecticut corporation, will/or may not hold various events and activities, including but not limited to, autocrosses, time trial rallies, or other automotive related events, and/or meetings or other events in which the undersigned may voluntarily and of his/her own volition elect to participate, collectively, to “the Events”.

The undersigned acknowledges and understands that the Events in which the undersigned will engage, may involve a risk to injury to the person and/or property of the undersigned and others.

*While participating, in any capacity, in an Event, the undersigned acknowledges that he or she will comply with all relevant club rules, will obey applicable state and local laws, and will take direction from those persons (including, but not limited to, event chairmen, marshals and course workers) responsible for conducting the Event. Additionally, the undersigned agrees that, while in the vicinity of an event, he or she will comply with local and state laws, particularly those pertaining to vehicle noise and speed.*

**The undersigned also acknowledges and understands that there may be unknown and/or unanticipated risks and/or injuries, and in executing this document, the undersigned agrees that this release and indemnification agreement is intended to include and contemplate these risks, injuries and damage to the property of the undersigned and/or others.**

**Now in consideration for the Connecticut Autocross and Rally Team, Inc., allowing the undersigned to participate in the sponsored Event by C.A.R.T., the undersigned agrees to save, hold harmless and indemnify the said Connecticut Autocross and Rally Team, Inc., it's officers and board members, of and from any and all claims, liabilities and expenses, including attorneys fees, arising because of or out of any claim which hereafter may be presented by anyone for loss and/or damage of any kind, including but not limited to personal injuries or property damage, as a result of or in conjunction with in any matter, the acts, omissions or indiscretions of the undersigned at or related to the events or involving the Connecticut Autocross and Rally Team, Inc., in any way.**

**The undersigned acknowledges and agrees that this Release and Indemnification Agreement shall apply to any and all agents, successors, executors, administrators, and/or assigns of the party (or parties) whom the undersigned agrees to and has or will notify, agents, successor, executing administrators and/or assigns, of this Release and Indemnification Agreement, and the terms of which have voluntarily, and of the party (or parties) own volition been agreed to and accepted prior to participation in the events. The undersigned declares and represents that no promise or agreement has been made, and that this document contains the entire agreement between parties.**

**The undersigned has read the foregoing release and Indemnification Agreement and fully understands it. (Applies to all family members when applying for family membership)**

**Print Name:**