

Mason Valley Fire Protection District

Yerington Nevada

| Demolition Derby Participant Application and Liability Release | | | | | |
|--|--------------------------|-------|---------------------------------|----------------|--|
| First Name: | Last Name: | | | DOB: | |
| Physical Address: | | City: | State: | ZIP: | |
| Mailing Address: Same As Physical Address Above | | City: | State: | ZIP: | |
| Driver Phone 1: | Driver Phone 2: | | Driver Email: | | |
| Emergency Contact Name: | Emergency Contact Phone: | | Emergency Contact Relationship: | | |
| | | | | | |
| ENTRY TYPE (CHECK ONE) | IINI | STOCK | | TRUCK | |
| <i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i> | | | | | |
| A non-refundable fee of \$100.00 must accompany this signed and witnessed application | | | | | |
| Return this Application to the MVFPD office no later than two weeks prior to the event. | | | | | |
| The applicant has read and understands all rules and requirements associated with this event, including post event vehicle removal requirements AGREEMENT | | | | | |
| TO: All Derby Car Sponsors, Lyon County Nevada, The Lyon County Fair Board, the Mason Valley Fire Protection District and the Yerington Volunteer Fire Department, Inc. | | | | | |
| It the consideration of being able to participate in the DEMOLITION DERBY, on August 16th 2025, the undersigned agrees to read and observe all of the rules and safety requirements set forth by the drivers and sponsors of the derby and further agrees to waive any claims against, and release any and all liability, the above named parties and any member of the public affected thereby. | | | | | |
| I, the undersigned, hereby state that I am familiar with and assume all risks incidental to my participation in said DEMOLITION DERBY | | | | | |
| MINOR DRIVER RELEASE - DRIVER UNDER EIGHTEEN (18) YEARS OF AGE | | | | | |
| Parent Initials NO DRIVERS OR PIT ENTRY TO ANYONE UNDER 16 YEARS OF AGE | | | | | |
| Print Driver First and Last: | | | | Car #: | |
| Drivers Signature: | | | | Date and Time: | |
| Witness Name First and Last: | | | | | |
| Witness Signature: | | | | Date and Time: | |
| | | | | | |



masonvalleyfire.org

118 S Main Street Yerington NV 89447