

Southern California Motorcycling Association



**California Adventures
Registration Form***

Participant's Name _____

Are you a Rider or Passenger*? _____ Are you a minor? _____

Address _____

City _____ State/Prov. _____ Zip _____

Home Phone _____ Cell Phone _____

Emergency Contact Name _____

Emergency Contact Phone _____

In Which Event are you participating? Mark Only One:

___ California Parks Adventure

___ California Mission Tour

Motorcycle Make/Model/Year: _____

SCMA Membership # _____ (If "applying", indicate that)

Participant Signature _____

Today's Date _____

Parent/Guardian Signature* _____

**Passenger registration is optional, but all participants must sign an AMA "Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement" that is printed in color so the red shows. All participants who register and pay the \$50 fee will receive a passport and are eligible to earn completion pin and plaque. Minors must obtain parent/guardian signature and complete AMA "Minor Release and Waiver of Liability..." All forms available on SCMA website. Use one registration form per registering participant.*

Send \$50 check or money order to:

Southern California Motorcycling Association

California Adventures

PO Box 487

Norwalk, CA 90651-0487