



**RACE SERVICES, INC.**

www.rsiwgi.com

P.O. Box 84, Watkins Glen, NY 14891-0084

In applying for membership in Race Services, Inc. (hereafter referred to as "RSI"):

1. I am fully aware that I am volunteering my services for an extremely hazardous undertaking, and that when I am serving with RSI I will be subjecting myself at all times to the ever-present possibility of serious bodily injury and/or damage to, or loss of, personal property carried to the event.
2. I understand that I will receive absolutely no monetary compensation in any form for my services to, or with RSI, in connection with any automotive speed event, or any other form of competition event.
3. I will not hold RSI as a group, or any of its members, individually or collectively, responsible for any bodily injuries I may receive, and/or damage to or loss of personal effects sustained as a result of my participation in any competitive event. Continuing membership in RSI and participating at events is on a purely voluntary basis, and the decision to do so is strictly my own.
4. I attest to the fact that I am physically fit to perform all duties required by RSI in all aspects—mental or otherwise—or that I have a qualified doctor's testimony that I can perform all duties required by an RSI member in good standing.
5. I agree to abide by all rules and regulations governing the RSI organization, its operational procedures and its activities, and that it is my personal responsibility to familiarize myself with the basic organizational, administrative, and operational policies and procedures, and that I will receive and accept all orders, directives and instruction from the RSI Officers, Board Members, Chiefs of Specialty, and appointed Station Captains.
6. I understand that I may be required to work a minimum number of events (marquee and/or pro), or a per event basis as deemed necessary and appropriate by my Chief of Specialty.
7. I agree to outfit myself with the prescribed RSI uniform, if necessary.
8. I fully understand that I may be dismissed from RSI as a result of any infraction of the RSI rules and regulations, or insubordination on my part, or my failure to comply with an order or directive.
9. I agree to conduct myself in a sportsmanlike manner at all times, and to endeavor to advance the character of RSI in automobile racing specifically, and the sport in general.
10. A yearly membership fee is due upon submission of this application. In the event my dues payment is not honored by the bank, I agree to pay any bank charges in addition to my membership dues.

Annual dues are \$15.00  
 \$10.00 for persons 65 and over --  
 include proof of age with application  
**U.S. DOLLARS ONLY**

Checks should be made payable to:  
**Race Services, Inc.**

Send dues payment and application to:  
**Race Services, Inc.**  
**P.O. Box 84**  
**Watkins Glen, NY 14891**

By signing below, I acknowledge acceptance of the terms and conditions of membership in Race Services, Inc., as stated above, and affirm that as of this date, information provided by me in this application is true and complete to the best of my knowledge.

\_\_\_\_\_  
**Legal Signature**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
*Application Date*

**New**                      **Renewal**  
 (circle one)

(MS Word – 11/10)

ID No. \_\_\_\_\_

Paid: \_\_\_\_\_ E: \_\_\_\_\_

A: \_\_\_\_\_

WP: \_\_\_\_\_

**PERSONAL INFORMATION** (PLEASE FILL OUT IN FULL EVEN IF THIS IS A RENEWAL.)

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country (i.e., Canada) \_\_\_\_\_

Phone Numbers: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_ E-mail address \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Do you wish your address, phone and/or e-mail to be unlisted? \_\_\_\_\_  
mo day yr Yes or No

We post only month and day of birth on our website birthday list.

Would you like your newsletter e-mailed to you rather than mailed? \_\_\_\_\_ E-mail: \_\_\_\_\_  
Yes or No

**IN CASE OF EMERGENCY, CONTACT:**

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

How did you hear about RSI? \_\_\_\_\_

**INTERESTS AND QUALIFICATIONS**

Indicate the Specialty for which you are signing up with an (X).

- Fire-Rescue (must be a member of a fire department)
- Flagging & Communications
- Grid
- Paddock
- Pits
- Race Medical (Copy of current NY EMT or CFR card must accompany application)
- Worker Support
- Course Marshal
- Start/Finish

NOTE: You must be 18 or older to be a member of Race Services, Inc.

**If Fire-Rescue is checked:**

List name of Fire Department in which you are a member: \_\_\_\_\_

Name of Fire Chief and contact information: \_\_\_\_\_

Previous Experience (new applicants only):

Years of Experience: \_\_\_\_\_

Licenses or certifications held and dates: \_\_\_\_\_

SPONSOR NAME (new members only): \_\_\_\_\_