



2023 TECH OFFICIAL LICENSE APPLICATION

Tech Official's Name _____ SFI #: T

Prefix _____ First _____ Middle _____ Last _____ Suffix _____

Date of Birth: ____/____/____ Gender: Male Female Prefer not to say Shirt Size: _____

Address: _____ City: _____ State: _____ Zip: _____

Primary Phone: _____ Can Text? Y N Secondary Phone: _____ Can Text? Y N

Email: _____ SSN: _____

Support Vehicle I wish to opt out of NTPA email newsletters I wish to opt out of NTPA text messages

Make: _____ Model: _____ Year: _____ ATV UTV Golf Cart

INSURANCE COVERAGE

When working at an NTPA Sanctioned event with an NTPA Tech Official's License and K & K Promoter's Insurance, the following coverages are in effect:

Major Medical and Dental:	\$200,000	Total Temporary Disability:	\$100/day for 52 weeks
Promoter Event Insurance:	\$25,000	Accidental Death and Dismemberment:	\$25,000
Membership Insurance:	\$200,000		
Liability: Promoter Event Insurance.....	\$2,000,000, \$3,000,000, or \$5,000,000		
Membership Insurance.....	\$5,000,000		

Beneficiaries: Primary _____ Secondary _____

AGREEMENT OF RELEASE

- HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE NTPA AS AN ASSOCIATION, INCLUDING ALL ITS CORPORATE ELECTED AND APPOINTED OFFICIALS, ALL MEMBERS OF COMMITTEES, REFEREES AND INSPECTORS, ITS INDIVIDUAL MEMBERS, ITS MEMBER CLUBS, AGENCIES OF GOVERNMENT WHICH CONTROL ESSENTIAL EVENT SITES, FINANCIERS AND FIRMS WHICH RENDER ESSENTIAL GRATIS, INCLUDING ALL OFFICERS, AGENTS AND EMPLOYEES OF THE FOREGOING AND VOLUNTEER WORKERS ASSISTING IN SANCTIONED NTPA EVENT ACTIVITIES, ALL HEREINAFTER REFERRED TO AS "Releases" from or for any and all liability to me, my personal representatives, heirs, next of kin, successors and assigns, for all loss or damage for bodily injury, or death or damage to property of the undersigned which in any way grows out of or results from any NTPA event activity or part thereof, during the actual sanction period and whether any such claim may be based upon alleged breach of any statutory duty or obligation; and
- HEREBY AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releases and each of them from any loss, liability damage or cost they may incur due to the presence of the undersigned in or upon the restricted area or in any way competing, officiating, observing, or working for, or for any purpose participating in the event and whether caused by the negligence of releases or otherwise.
- HEREBY ASSUME FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releases or otherwise while in or upon the restricted area, and/or while competing, officiating, observing, or working for, or for any purpose participating in the event.
- EXPRESSLY ACKNOWLEDGES AND AGREES THAT THE ACTIVITIES OF THE EVENT, ARE VERY DANGEROUS AND INVOLVE THE RISK OF SERIOUS INJURY AND/OR DEATH AND/OR PROPERTY DAMAGE, THE UNDERSIGNED further expressly agrees that the foregoing Release Waiver and Indemnity Agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State which the event is conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.

IN CONSIDERATION OF BEING GRANTED AN NTPA LICENSE, I HAVE READ THE AGREEMENT OF RELEASE ABOVE AND HAVE SIGNED THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY FOR ALL NTPA EVENTS. I AGREE AND GUARANTEE BY PRINTING AND SIGNING MY NAME BELOW TO HAVE ALL SFI AND SAFETY COMPONENTS WITHIN AND ON MY COMPETITION VEHICLE AS REQUIRED BY NTPA RULES. I ASSUME RESPONSIBILITY FOR THE USE OF SAID COMPONENTS. I HAVE READ, UNDERSTAND, AND AGREE TO ABIDE BY THE NTPA COMPETITION RULES LISTED IN THE 2023 NTPA RULEBOOK AND ANY/ALL PUBLICATIONS OF THE WPI/NTPA ADMINISTRATION.

IN CONSIDERATION OF THE NTPA PROMOTIONAL EFFORTS ON BEHALF OF THE SPORT, I HEREBY ASSIGN ALL COMMERCIAL PICTURES, MERCHANDISE SALES AND BROADCAST RIGHTS TO THE NTPA.

Print Name: _____ Signature: _____ Date: _____

FEES:	Before May 1: \$165	After May 1: \$215
Tech Official License Fee:	\$ _____	
Pullers Against Drugs Donation:	\$ _____	
Total:	\$ _____	

If a currently licensed 2023 NTPA competitor, Officials Fee is no charge.

CREDIT CARD INFORMATION

Cardholder's Name: _____

Phone: _____ Exp: _____ CVC: _____

Card # _____

Cardholder's Signature: _____

No Refunds After May 1, 2023

PAYMENT TYPE:

Cash Check # _____

Card Checks payable to WPI (US funds)

MAIL TO: NTPA MEMBERSHIP • 6155 SUITE B HUNTLEY ROAD • COLUMBUS, OH 43229