

To be eligible for the Polaris ATV Contingency Program racer must complete section A-D of the 2008 Enrollment Form and send or fax completed form to address or number on the bottom of page 2.

READ AND SIGN THE RELEASE. A parent or guardian must also sign the Parent or Guardian Consent for all riders under 18 years of age. Section C must only be completed if dealer or someone other than an immediate family member owns the ATV.

Section A – RELEASE, LIABILITY WAIVER, INDEMNIFICATION AND ASSUMPTION OF RISK

In consideration of being considered to participate in the Polaris 2008 ATV Contingency Program, I, the undersigned, for myself, successors, heirs and assigns, release, waive liability, promise never to sue, and forever discharge, Polaris Industries Inc. (Polaris) and its affiliates, agents, employees, servants, officers, directors, and authorized Polaris dealers ("Released Parties") from all claims, including but not limited to claims for negligent acts or omissions, actions or judgments I may have or claim to have against Polaris and related parties. I agree that I am responsible for all personal injuries, including death, and injuries to property, real or personal, caused by or arising out of my participation in the 2008 Polaris ATV Contingency Program.

I understand that ATV riding is inherently dangerous. I represent to Polaris that I have had sufficient experience riding ATVs to understand all the risks involved in ATV racing. I expressly and voluntarily assume all risk of personal injury or death sustained while participating in the Program, whether or not caused by the negligence or other fault of Released Parties, or any of them, including but not limited to equipment malfunction from any cause, inadequate training or supervision, defective design of equipment or ATV race course, failure to keep safe, failure to investigate or supervise other riders, or failure to warn of potential risks.

I further agree for myself, my successors, heirs and assigns to indemnify and hold the Released Parties harmless from all claims and suits for personal injuries, including death, and damages to property caused by my act or omission arising out of my participation in the 2008 Polaris ATV Contingency Program, and from all judgments recovered and from all expensed incurred in defending said claims or suits.

I am in good health and have no physical conditions that would prevent me from participating in the 2008 Polaris ATV Contingency Program.

I further agree to that without compensation, my name, as well as any photographs, pictures, slides, or movies taken of myself or made in connection with my participation in the 2008 Polaris ATV Contingency Program, or any reproduction of the same, may in any manner be used by Polaris, or by any person, corporation or association authorized by Polaris.

I understand that I am giving up substantial rights by signing this document. I agree to abide by all the eligibility requirements as listed in the eligibility requirements on the previous page.

I agree to use all recommended safety equipment and to abide by all warnings and safety recommendations of Polaris. I agree that I will not race while under the influence of alcohol or drugs.

Signature of Rider

Date

Section B – PARENTAL CONSENT, RELEASE, LIABILITY WAIVER AND INDEMNIFICATION

I hereby certify that I am the parent or legal guardian of _____ (print name), a minor ("Child") and that I have read Section A of this Release set forth above. I understand that for my Child to participate in the 2008 Polaris ATV Contingency Program, I hereby consent to my Child's participation in the 2008 Polaris ATV Contingency Program and agree on behalf of my Child, myself and my spouse to release the Released Parties and waive liability from all claims, including, but no limited to, claims for negligent act or omissions, arising from or related to my Child's participation in the 2008 Polaris ATV Contingency Program. I agree that my Child and I will be bound by all for the terms listed in Section A and B of this release.

I understand that there are risks (including serious bodily injury or death) associated with participating in the 2008 Polaris ATV Contingency Program, and I hereby assume, on behalf of my Child, myself and my spouse, all such risks, including those detailed above. I am releasing the Released Parties from any or all claims I or my spouse may have for emotional distress or loss of consortium in the event my Child suffers bodily injury or death.

I further agree, for myself, my spouse, successors, heirs and assigns, to indemnify, defend and hold the Released Parties harmless from all claims and suits for personal injuries, including death and damage to property caused by any act or omission arising out of my Child's participation in the 2008 Polaris ATV Contingency Program, and from all judgments recovered and from all expenses incurred in defending said claims or suits.

I understand that I am giving up substantial rights by signing this document.

I further agree to that without compensation, my Child's name, as well as any photographs, pictures, slides, or movies taken of my Child or made in connection with my Child's participation in the 2008 Polaris ATV Contingency Program, or any reproduction of the same, may in any manner be used by Polaris, or by any person, corporation or association authorized by Polaris.

Parent Signature

Print Name

Date

Section C – SPONSORED RIDER AFFIDAVIT

I have agreed to sponsor the rider listed above ("rider"). I am the owner of the ATV and understand that no additional person(s) other than the "rider" will be paid contingency from Polaris. Dealers sponsoring riders must have paid for the unit in full.

Dealership/Owners Name

Owners Address

Owners Signature

Section D - TO RECEIVE CONTINGENCY PAYMENT, RACER MUST FILL OUT THE IRS FORM W-9 BELOW.**REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION
SUBSTITUTE FORM W-9**

PLEASE TYPE OR PRINT	Name: Last, First, Middle Initial		
	Address:		
	City:	State:	Zip Code:
	Phone:		

TAXPAYER IDENTIFICATION NUMBER (TIN) - ENTER SOCIAL SECURITY NUMBER BELOW:**Social Security Number (SSN)**

<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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CERTIFICATION SIGN HERE	Under penalties of perjury, I certify that the number provided on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me.)	
	Signature:	Date:

PURPOSE OF THIS FORM: A PERSON WHO IS REQUIRED TO FILE AN INFORMATION RETURN WITH THE IRS MUST OBTAIN YOUR CORRECT TIN TO REPORT INCOME PAID TO YOU. FURNISHING YOUR CORRECT TIN AND MAKING THE APPROPRIATE CERTIFICATION WILL PREVENT PAYMENTS FROM BEING SUBJECT TO 31% BACKUP WITHHOLDING.

For office use only:

Polaris Vendor # _____

NOTE: Sections A-D of the 2008 Enrollment Forms need only be completed once per year to enroll in Polaris ATV Contingency Program.

For questions concerning the 2008 Polaris ATV Contingency Program, email atvracing@polarisind.com or send a FAX to Polaris ATV Contingency Program at 763-417-2152.

Send completed Enrollment Forms **Sections A-D** to the address below, or FAX to 763-417-2152.

**Polaris ATV Racing
Polaris Industries Inc.
2100 Highway 55
Medina, MN 55340**

All Enrollment Forms must be filled out completely (Sections A-D) to enroll in the ATV Contingency Program. For additional information visit the Polaris ATV Racing website at: www.polarisperformance.com