



5th Annual Harold King Memorial Tractor Ride Saturday, June 5, 2021

Name: _____ Phone: _____

Mailing Address: _____ State: _____

Zip: _____ Email: _____

Flashlight Qty: _____ (\$10 per extra light) Valid Driver License (Circle): Yes or No

State of Issuance: _____ Drivers License #: _____

Tractor Make, Model, Year: _____

of Persons riding your tractor (Include yourself): _____

Only one registration per form. Registration Fee \$30.00, this includes (1) lunch and (1) Flashlight.

Additional Riders will be charged \$10.00 per lunch OR \$15.00 for (1) lunch and (1) Flashlight.

Checks can be made to Harold King Family Memorial.

*** Email hkmemorialride@gmail.com with any questions. ***

Safety Rules & Information:

- Registration starts at 8:00am with ride to begin **promptly at 8:30am** - *following a driver meeting & prayer.*
- All tractor drivers *must have* a **valid** driver's license.
- All tractors *must travel* at a speed of **14mph or more.**
- **No passing** – unless the tractor ahead is stopped for repairs/unforeseen reasons.
- No extra riders unless using seat **approved by the HKMTR safety crew.**
- Tractor *must be* equipped with a slow-moving vehicle sign.
- Abide by **ALL** decisions, rules, & regulations of the tractor ride management team in weather and non-weather-based emergencies. Weather based emergencies will be based on information from the National Weather Service in the event of inclement weather.
- **There will NOT be a rain date for this year's ride.**

In the event of inclement weather (Circle one):

Option 1) I opt to donate my registration fee to the Memorial Fund for future use for charity.

-- OR --

Option 2) I would like my check to be voided and shredded.

I also understand that the memorial ride team or anyone affiliated with the ride team and/or family members **WILL NOT** be held liable for any damage(s), breakdowns, injuries, or death(s) on this ride, and I hereby release the persons stated above from any and all liabilities. I understand **ALL** of the ride rules, and I also understand that the ride team reserves the right to refuse entry to anyone, and/or ask participants to leave in the event of misconduct.

I agree to the terms/conditions/rules listed above (Circle): Yes or No

Name: _____ Total Fee (Crew Use Only): _____

Signature: _____ Date: _____

Please send preregistration and payment to:

Kirk Langner

ATTN: Harold King Memorial Ride.

P.O. Box 496, Schaller, Iowa, 51053