

Vehicle Extended Parking Application

Please complete and return to:
Ann Bixler / ann@mazdaraceway.com / fax 831-657-9477

Last Name	First Name			
ID#	License Plate#			
Make/Model	Color			
Contact Person	Phone Number			
Storage Dates TO				
Vehicle Overnight Parking				
\$25/night in Ranch Parking (map on last page)				
Total Vehicle Parking Fee				
Please make checks payable to SCRAMP				
For credit card charges, please find attached credit card authorization form.				

Directions

After turning into the facility off of Highway 68, turn left up B Road On your left there will be a gravel road with green gates that will be open Park inside the teardrop

Anyone parking elsewhere will be towed at the owner's expense and will not be refunded the vehicle parking fee.



2017 VEHICLE EXTENDED PARKING

Release and Waiver for Liability and Indemnity Agreement

The undersigned acknowledges that SCRAMP/Mazda Raceway Laguna Seca, County of Monterey is extending a special privilege in allowing him or her to park his or her vehicle overnight or store during the dates provided below. In consideration of the privilege to store vehicles at the designated area (Ranch Parking), the undersigned, for himself or herself and any personal representative, heirs, and next of kin, hereby acknowledges, agrees and represents the following:

RELEASE I agree to release, waive, discharge, and covenant not to sue SCRAMP/Mazda Raceway Laguna Seca, County of Monterey, its directors, officers, employees, and agents from all liability to me, my personal representative, heirs, and next of kin for any loss, theft, or damage, and any claim or demands therefore on account of injury to my property, whether caused by the negligence of SCRAMP/Mazda Raceway Laguna Seca, County of Monterey or otherwise during the dates provided below.

INDEMNIFICATION I agree to indemnify and save and hold harmless SCRAMP/Mazda Raceway Laguna Seca, County of Monterey Parks Department from any loss, liability, theft, damage or cost that may incur due to my storing my vehicle, upon or about SCRAMP/Mazda Raceway Laguna Seca, County of Monterey's premises whether caused by the negligence of SCRAMP/Mazda Raceway Laguna Seca, County of Monterey or otherwise.

ACCEPTANCE OF RISK I understand that SCRAMP/Mazda Raceway Laguna Seca, County of Monterey never intended, nor designed the above mentioned lot to be used as a storage facility and I acknowledge that SCRAMP/Mazda Raceway Laguna Seca, County of Monterey does not guarantee the security of the property being stored. In addition, I realize that the lot is not locked, secured or guarded. Therefore, I agree to assume full responsibility for and risk of property damage due to the negligence of the SCRAMP/Mazda Raceway Laguna Seca, County of Monterey or otherwise while my vehicle is stored during the dates provided below.

CONTACT PERSON I agree to provide a contact person and a phone number in my absence so that, in the event of an emergency, the contact person will be responsible for my vehicle. The undersigned further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as California law allows and that, if any portion is held invalid, it is agreed that the balance shall continue in full legal force and effect.

This agreement is signed in Monterey County which shall be the exclusive venue for resolution or litigation of any disputes between the parties hereto over this Agreement. The prevailing party in any such dispute shall be entitled to recover reasonable legal fees and costs. I also represent and warrant that I have adequate insurance on this vehicle which I will maintain at all times and have advised my insurer that I am hereby releasing SCRAMP/ Mazda Raceway Laguna Seca and County of Monterey and State of California of any and all liability or claim arising out of the storage of my vehicle or vehicles.

Signature	Date	
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Credit Card Authorization Form

Sports Car Racing Association of the Monterey Peninsula (SCRAMP)
P.O. Box 2078
Monterey, CA 93942
Phone - (831) 242-8260
Fax - (831) 373-0533

This letter constitutes an authorization to use my credit card

Please circle credit card type:	Visa	Master Card	American Express
Credit Card Number			
Expiration Date	CCV Number	(3 digits on back visa ar	nd M.C./4 digits on front of Amex)
Zip Code associated with Card_			
Name on Card			
Name of Company associated w	vith card		
Please charge my card as I	direct below		
For payment of			
In the amount of \$			
Provided by SCRAMP during (1	name of event)		
Authorized Signature of Cardho	older		
Date	Phone Number	•	
Your signature constitutes SCRAMP to charge your cr			
Send Receipts to:			
Email			
Fax_			

