



# Tractor Drive <sup>for</sup>

Whiteside County

## AGRICULTURE in the Classroom

Starts from the Whiteside County Fairgrounds in Morrison

# MONDAY, AUGUST 13, 2018

A fundraising event for the



Whiteside County  
**FARM BUREAU**  
Foundation



### DRIVER INFORMATION (PRINT CLEARLY)

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

### TRACTOR INFORMATION (PRINT CLEARLY)

Tractor Make \_\_\_\_\_

Tractor Model \_\_\_\_\_

Tractor Year \_\_\_\_\_

**Proof of Insurance:** Include with your registration form.  
**Fax:** (815) 772-4588 / **Email:** whitesidecountyfarmbureau@gmail.com

I will use a buddy seat:  Yes  No

See Buddy Seat requirements on reverse side.

**Complete Information on Back of Form**

### REGISTRATION FEE:

Check box that applies

Before July 6 (postmarked by July 6)  \$40

After July 6  \$45

Day of Event  \$50

### I support Agriculture in the Classroom!

I'm donating an additional amount of: \$ \_\_\_\_\_

**TOTAL AMOUNT DUE:** \$ \_\_\_\_\_

Make checks payable to:  
Whiteside County Farm Bureau Foundation

The Whiteside County Farm Bureau® Foundation is a charitable organization exempt from taxation under the US Code 501(c) 3. Donations to the Foundation are deductible as charitable contributions for federal income tax purposes to the extent provided by law.

### DRIVER SAFETY PLEDGE

I agree to abide by all the rules set forth and that my tractor and I will meet all necessary requirements. I pledge to:

- Possess a valid driver's license.
- Have insurance on my tractor. (**Proof of insurance is required. Send with application or provide the day of ride.**)
- Follow all traffic laws understanding that my tractor is considered a motor vehicle while driving on Illinois roads.
- **Not** carry riders except on an approved buddy seat, and **never** split clutch and break operations.
- Stay with assigned group.
- **Not** pull anything with my tractor during the ride.
- Have an SMV (slow-moving vehicle) emblem posted on my tractor.
- Follow the instructions of the group leader and sponsoring organizations.
- **Not** pass other tractors on the ride unless instructed.
- **Not** consume any alcohol while driving my tractor.
- Bring a tow rope and/or chain.
- Maintain a minimum speed of 10 miles per hour.
- Maintain a safe yet close distance between tractors.

I understand breaking these rules will result in denial of all future applications. Violators will be asked to leave the ride per the Ride Management Team.

# BUDDY SEAT REQUIREMENTS

All Buddy Seats must comply with the following requirements:

- Driver and rider must be on the same plane (rider may not be higher or lower than driver)
- The seat must have handrails and a backrest
- The rider's feet may not dangle; there must be a footrest
- Seats may not be on the fender
- Only two people may ride on the tractor at any given time: one (1) driver and one (1) person on a buddy seat
- Ride management reserves the right to reject any buddy seat

All drivers using a buddy seat must submit a photo and have their buddy seat approved in advance of the drive. Please submit photo via email to [whitesidecountyfarmbureau@gmail.com](mailto:whitesidecountyfarmbureau@gmail.com) or mail to: Whiteside County Farm Bureau Foundation, 100 East Knox Street, Morrison, IL 61270

## RELEASE OF LIABILITY AND ASSUMPTION OF RISK

**NOTICE: THIS RELEASE IS A CONTRACT WITH LEGAL CONSEQUENCES. READ CAREFULLY BEFORE SIGNING.**

*In consideration of your acceptance of this entry and allowing me to participate in the Whiteside County Farm Bureau Tractor Drive for Agriculture in the Classroom and being permitted to drive or ride a tractor in the event I on behalf of my heirs, assigns, and legal representatives, do hereby release and forever discharge the Whiteside County Farm Bureau and Whiteside County Farm Bureau Foundation, and any and all of their affiliated organizations, parents, subsidiaries, successors, assigns, directors, officers, agents, managers, members and employees from any and all claims, demands, actions or causes of action, including injury, death or damage to property, which may occur during or as a result of participation in the event. Further, I attest that I have full knowledge of the risks involved in this event and am physically able and sufficiently trained to participate. I assume all risks associated in participation in this event.*

Participant's Signature \_\_\_\_\_ *SIGN HERE*

**Print** Participant's Name \_\_\_\_\_ Date \_\_\_\_\_

Participant's Signature \_\_\_\_\_ *SIGN HERE (if necessary)*

**Print** Participant's Name \_\_\_\_\_ Date \_\_\_\_\_

**PARENT or GUARDIAN of minor participant:** *I, as parent or guardian of the above-named minor, hereby agree, individually and on behalf of my child or ward, to the terms above.*

Signature of Participant's Parent/Guardian \_\_\_\_\_ *SIGN HERE (if necessary)*

**Print** Name of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

## CANCELLATION POLICY

*The ride will take place - rain or shine - so be prepared.*

**No refunds issued after August 3.**

### Did You Do the Following?

- Review the DRIVER SAFETY PLEDGE
- Submit BUDDY SEAT Information *(if necessary)*
- Sign RELEASE OF LIABILITY AND ASSUMPTION OF RISK
- Sign MINOR PARTICIPANT CONSENT *(if necessary)*
- Provide PROOF OF INSURANCE
- Include REGISTRATION FEE

**Send completed application to the following address. Checks made payable to:**



Whiteside County  
**FARM BUREAU**  
Foundation

100 East Knox Street, Morrison, Illinois 61270

Phone (815) 772-2165 ■ Fax (815) 772-4588

Email [whitesidecountyfarmbureau@gmail.com](mailto:whitesidecountyfarmbureau@gmail.com)

### OFFICE USE ONLY

Payment Method \_\_\_\_\_ Check # \_\_\_\_\_

Amount Paid \_\_\_\_\_ Date Received \_\_\_\_\_