2022 Jackson Motorplex Media Credential Application

One form per applicant—Credential expires Dec. 31, 2022

Please Return form to: Jackson Motorplex P.O. Box 143 Jackson, MN. 56143

Upon approval, this means you will be placed on a permanent annual media list for the season. - *A Photo I.D. will be required when you sign in.*



email: djohnson@jacksonmotorplex.com

When considering your application, we do not require, but may request a letter from your editor or media organization. Freelance applicants WILL NOT be accredited without proof of a confirmed assignment from media organization.

Media Organization/Company:				
Name of Applicant:		DOB:_		<u></u>
Mailing Address:	City:		State:	Zip:
Phone:	Cell:			
Email:				
Editor Name & Number:				
2022 JACKSON MOTORPLEX TERMS & CONDITIONS				
Media accreditation will be issued by the Jackson Motorplex in the 2022 racing season. Neither this pass or the rights granted herein		·	-	·
The use of any account, description, picture, photograph, video, a	audio, reproducti	ion, or any inf	ormation conc	erning racing events
other than for news coverage is prohibited, except with prior wri	tten consent of t	he Jackson M	otorplex.	
Real-time transmission of streaming video, digital images, real tir Dirtvision.com is otherwise prohibited.	ne audio is the ex	xclusive right	of the Jackson I	Motorplex and
No logo, trademark, advertisement, or other graphic shall be sup permission of the Jackson Motorplex and Dirtvision.com.	erimposed, or inc	corporated in	any highlights	without prior writter
The Accredited Party and Pass Holder acknowledge that the natu attending the events, acknowledge that they have been warned to causing injury, death or property damage.				
The Accredited Party and Pass Holder agree to waive any rights of and releases from all liability, agrees not to sue and indemnifies the landowners and lessees and other organizations connected to the and contractors for any personal injury, death, damage or loss of	he FR2, LLC dba . e events and thei	Jackson Moto r directors, m	rplex, any parti embers, office	cular team or driver, rs, employees, agent
The Accredited Party also undertakes to indemnify the Associated death, damage or loss of any kind suffered or sustained by that the at the events.	_	· ·		· · · · · · · · · · · · · · · · · · ·
BY MY SIGNATURE BELOW, I CERTIFY THAT I HAVE READ AND FUTURE TERMS OF THIS AGREEMENT.	JLLY UNDERSTAI	ND THIS AGRI	EEMENT. I AGR	EE TO ABIDE BY ALL
Applicant's Signature:		Date:_		