



**2024
INDYCAR
SUBSTANCE ABUSE POLICY
AUTHORIZATION FOR TESTING AND RELEASE
FOR MINOR**

Name of Minor: _____ (“Minor”)

I am the parent or legal guardian of Minor and agree to the terms of this 2024 INDYCAR Substance Abuse Policy Authorization for Testing and Release for Minor on behalf of myself, Minor, and Minor’s heirs, next of kin, assigns, and personal representatives.

I and Minor have received and read the 2024 INDYCAR Substance Abuse Policy and agree to its terms as it may be amended by INDYCAR from time to time.

I hereby give my consent to INDYCAR, LLC (“INDYCAR”) and its designated agents, including but not limited to Square 1 Services and Aegis Sciences Corporation, to collect blood, urine, saliva, hair, and/or breath specimens from Minor, and to test those specimens for the presence of alcohol and/or any Prohibited Substance, respectively, under the 2024 INDYCAR Substance Abuse Policy; and to conduct such other tests as INDYCAR deems necessary from time to time to determine Minor’s fitness to be involved in or at an Event, all as set forth in the 2024 INDYCAR Substance Abuse Policy as it may be amended from time to time. In addition, I give permission to any doctor, nurse, technician, laboratory, or health facility which administers drug or alcohol tests to release the results of any tests of examinations to INDYCAR or its designee.

I and Minor recognize that the 2024 INDYCAR Substance Abuse Policy has been adopted and is administered by INDYCAR to promote the safety and integrity of INDYCAR-sanctioned racing. Accordingly, I ALSO HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE AND AGREE TO HOLD HARMLESS INDYCAR, ACCUS-FIA, PMCH Corp., Indianapolis Motor Speedway, LLC, series organizers, and testing laboratories and their officers, directors, members, managers, shareholders, owners, successors, assigns, agents, employees, representatives, affiliates, as well as any individual or company in any way affiliated with INDYCAR and any other persons or entities against whom I or Minor might have a claim, from and/or for claims, damages, losses, or expenses of any kind, whether caused by negligence or otherwise, arising out of the implementation of the 2024 INDYCAR Substance Abuse Policy, or any act or omission in connection therewith, including and without limitation the testing of specimens and the publication of the test results and/or circumstances giving rise to such test to any third party or parties by INDYCAR or such drug testing laboratories or program administrators or medical review officers, as well as the directors, officers, members, managers, shareholders, owners, successors, assigns, employees, representatives, affiliates, and agents of each of them, or any other persons or entities.

This 2024 INDYCAR Substance Abuse Authorization for Testing and Release for Minor shall in no way limit any other agreement, consent, or release.

[SIGNATURE PAGE FOLLOWS NEXT PAGE.]

Printed legal name of parent or guardian _____

Signature of parent or guardian READ! THIS IS A LEGALLY BINDING DOCUMENT

Date _____

Printed name of witness _____

Signature of witness READ! THIS IS A LEGALLY BINDING DOCUMENT

Printed legal name of parent or guardian _____

Signature of parent or guardian READ! THIS IS A LEGALLY BINDING DOCUMENT

Date _____

Printed name of witness _____

Signature of witness READ! THIS IS A LEGALLY BINDING DOCUMENT

Minor Signature showing acknowledgement and acceptance

READ! THIS IS A LEGALLY BINDING DOCUMENT

Date _____

Printed name of witness _____

Signature of witness READ! THIS IS A LEGALLY BINDING DOCUMENT

Rev. 1.02.24