

RELEASE OF LIABILITY

THIS DOCUMENT LIMITS YOUR LEGAL RIGHTS – PLEASE READ CAREFULLY BEFORE
SIGNING

In exchange for the right to participate in the activity of _____
_____, organized by the
Lehigh Valley ATV Association, Inc. and held on the following date(s): _____
_____ (hereinafter referred to as the “Activity”),

I _____,
(print name)

successors in interest to the following:

1. AGREEMENT TO FOLLOW DIRECTIONS – I agree to observe and obey all the posted, or otherwise announced, rules and warnings issued by any officer, director, member, or associate of Lehigh Valley ATV Association, Inc. related to participation in the Activity.
2. AGREEMENT TO FOLLOW EXISTING LAW – I agree to observe and abide by all applicable laws governing the Activity, including but not limited to all laws related to vehicle registration, insurance, and safety equipment.
3. ASSUMPTION OF THE RISK AND RELEASE – I recognize that there are certain inherent risks associated with the Activity and I assume full responsibility for any personal injury to myself, and to any personal injury or harm that I cause to other person, suffered during my participation in the Activity. I fully release from liability and discharge any officer, director, member, or associate of Lehigh Valley ATV Association, Inc. and Lehigh Valley ATV Association, Inc. for any injury, loss, or damage arising out of my participation in the Activity. This release and discharge applies to any injury or harm to me regardless who is at fault in causing said injury or harm.
4. INDEMNIFICATION – I agree to indemnify and defend any officer, director, member, or associate of Lehigh Valley ATV Association, Inc. and Lehigh Valley ATV Association, Inc. against all claims, causes of action, damages, judgments, costs and expenses, including attorney fees and other litigation costs, which may in any way arise from my participation in the Activity.
5. APPLICABLE LAW – Any legal or equitable claim that may arise from my participation in the Activity shall be resolved under existing Pennsylvania Law, regardless of where the claim may arise.

6. VOLUNTARINESS OF MY AGREEMENT - I agree and acknowledge that I am under no pressure or duress to sign this Release of Liability and I have had reasonable opportunity to review this Release of Liability before I sign it. I further agree that I am signing this voluntarily because I want to sign it and I elect to participate in the Activity. I agree that I am free to have this Release of Liability reviewed by legal counsel of my own choosing if I so choose. I further agree and acknowledge that if I choose not to sign this Release of Liability or if I violate the terms of this Release of Liability I will not be a participant in the Activity.
7. SEVERABILITY – I agree that the invalidity or unenforceability of any part of this Release of Liability shall not affect the validity or enforceability of any other part of this Release of Liability or of any other application of such part, as the case may be. The invalidity or unenforceability of any part of this Release of Liability shall not render any other part of this Release of Liability invalid or unenforceable.
8. DISPUTE RESOLUTION – I agree that any dispute arising out of my participation in the Activity, including any dispute arising out of this Release of Liability, shall be resolved through the arbitration process for civil litigation in Lehigh County Pennsylvania regardless of where the injury, loss, or cause of action occurred.

I HAVE READ THIS RELEASE OF LIABILITY; I UNDERSTAND IT AND I UNDERSTAND THAT I AM SURRENDERING CERTAIN LEGAL RIGHTS THAT I AM NOT REQUIRED TO SURRENDER. I AM SIGNING THIS RELEASE OF LIABILITY BECAUSE I WANT TO SIGN IT AND I WANT TO PARTICIPATE IN THE ACTIVITY TO WHICH IT APPLIES.

I UNDERSTAND THAT BY SIGNING THIS RELEASE I AM GIVING UP MY RIGHT TO SUE ANYONE INVOLVED IN THE LEHIGH VALLEY ATV ASSOCIATION FOR ANY HARM THAT COMES TO ME AS A RESULT OF PARTICIPATING IN THE ACTIVITY STATED ABOVE. IF I AM SIGNING AS THE PARENT OR GUARDIAN OF A MINOR, I AFFIRM THAT I AM AUTHORIZED TO SIGN ON BEHALF OF THE MINOR.

print name	signature	date
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print name of minor	print name of parent/guardian	signature of parent/guardian	date
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emergency contact	emergency contact's phone number
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