

## RELEASE/REGISTRATION FORM

### Holcombe Area Veterans Memorial – Ride to Remember

Please read this form carefully and sign. A release and registration form is required for every RIDER and PASSENGER.

I, the undersigned (on my own behalf of my heirs, personal representatives, successors and assigns), for and in consideration of the opportunity to participate in the Holcombe Area Veterans Memorial Ride to Remember, hereby release, forever discharge and hereby hold harmless the organizers and agents (Released Parties) of the Ride, specifically including, but not limited to, agents, from any and all claims, demands, rights, damages, actions and causes of action or suits of any kind or nature whatsoever, known or unknown, including actions to recover attorney fees, which in any way may result from or arise out of, my participation in this Ride.

This release extends to any or all claims I have or may have against the Released Parties, even if such claims result from strict liability or negligence on the part or any or all of the released Parties, concerning the conditions, qualifications, instructions, rules or procedures under which the Ride is conducted, or from any other cause. I understand this means I agree not to sue any or all Released Parties for any injury resulting to my property or myself arising from or in connection with the Ride. However, I do not release any Released Party from intentional misconduct on the Released Party's part.

I hereby state that I am experienced and familiar with the operations of the motorcycle I will be riding, and fully understand the risks and dangers inherent in motorcycling. I am voluntarily participating in the Ride and I expressly agree to assume the entire risk of any accidents, property damage or personal injury, including death, which I might suffer as a result of my participation in the Ride. I understand that it is my responsibility to monitor mechanical conditions of my motorcycle and related equipment, the weather conditions, road conditions, the location of the other vehicles and other similar conditions and factors to ensure my safety during the Ride.

By signing this Release, I certify that I have read this release and fully understand it and that I am not relying on any statements or representations of any of the Released Parties.

DRIVER SIGNATURE \_\_\_\_\_ RIDER SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_\_

#### PLEASE PRINT

#### MOTORCYCLE/CAR DRIVER INFORMATION

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

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

Phone \_\_\_\_\_

Email \_\_\_\_\_

#### RIDER INFORMATION

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

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

Phone \_\_\_\_\_

Email \_\_\_\_\_

NEED OF LODGING? YES / NO

Raffle # \_\_\_\_\_

Raffle # \_\_\_\_\_

If information is the same for both, just mark "same" on Rider side / PLEASE BE SURE ALL INFORMATION IS CORRECT