



GOLD WING ROAD RIDERS ASSOCIATION



RIDER EDUCATION PROGRAM RIDER COURSE WAIVER

Agreement and Release of Liability

I, (Print Name) _____

HEREBY ACKNOWLEDGE: That I have voluntarily applied to the Gold Wing Road Riders Association (hereinafter referred to as GWRRA) for motorcycle, sidecar, and/or trike instruction, training and participation in motorcycle/sidecar/trike riding at:

Location: (City/State/Province) _____

Type of Course: ARC ARC-R TRC TRC-R TC TTRC SRC Other _____

Shiny Side

I AM AWARE THAT MOTORCYCLE/TRIKE/SIDECAR INSTRUCTION AND RIDING ARE HAZARDOUS ACTIVITIES AND I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH THE KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF PERSONAL INJURY, PROPERTY DAMAGE OR DEATH.

Please Initial Here: _____

In the event of an emergency please contact the following **offsite** person

Contact Name

Phone Number

Relationship

AS LAWFUL CONSIDERATION, for being permitted by GWRRA, to participate in these activities and use the facilities at:

Training Site: _____

I hereby agree that I, my heirs, distributees, guardians, legal representatives and assigns will not make a claim against, sue, attach the property of or prosecute GWRRA, or one of its affiliated organizations, employees, agents, officers, directors, shareholders, owners, successors, or assigns, or participants for injury, damages or death resulting from the negligence or other actions or inactions, howsoever caused by any of the above named or the facility where this activity is held, as a result of my participation in motorcycling/Trike activities. In addition, I hereby release and discharge GWRRA, and its affiliated organizations, employees, agents, officers, directors, shareholders, successors or assigns, and participants from all actions, claims or demands, I, my heirs, distributees, guardians, legal representatives, successors or assigns, now have or hereafter have for injury, property damage or death resulting from my participation in motorcycling/Trike activities.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND CONTRACT BETWEEN MYSELF AND GWRRA AND ITS AFFILIATED ORGANIZATIONS, EMPLOYEES, AGENTS, OFFICERS, OWNERS, DIRECTORS, SHAREHOLDERS, SUCCESSORS OR ASSIGNS, AND SIGN IT OF MY OWN FREE WILL.

DATE: _____	DATE: _____
PARTICIPANT: _____ (Signature)	WITNESS: _____ (Signature)
_____ (Print Name)	_____ (Print Name)