



20th Anniversary of 9/11/01

RIDE TO REMEMBER

Motorcycle Run

Name _____

Phone _____

Email _____

Address _____

City _____ State _____ Zip _____

Passenger Name _____

Motorcycle Information

Year _____ Make _____ Model _____

Plate Number _____

Insurance Yes No

Waiver

Insurance: It is understood by the Undersigned that all registered vehicles are expected and understood to carry motorcycle liability coverage within minimum limits as dictated by statutory limit in state of motorcycle registration. The Undersigned acknowledges and understands that no insurance is available for coverage to the Undersigned unless otherwise provide by private insurance obtained by the Undersigned.

Liability: In consideration of the acceptance of the right to participate, entrants and passengers, be execution of this entry form, release and discharge True Patriots Care, Woodstock Harley-Davidson and all other sponsors and their officers, directors, trustees, employees, agents, representatives, volunteers, servants and anyone else connected with the manage or presentation of the Ride to Remember Motorcycle Run (hereinafter, the "RELEASED PARTIES") of and from any and all known or unknown damages, injuries, losses and/or claims from any cause whatsoever that may be suffered by entrant and passengers to his person or property. Further, each entrant and passenger expressly agrees to indemnify all of the forgoing entities, firms, person and bodies of and from any and all liability occasioned or resulting from the conduct of entrants and passengers or any participants assisting or cooperating with entrants and passengers and under the direction or control of entrants and passengers.

I understand and agree that all Ride to Remember Motorcycle Run entrants and passengers and their guests participate voluntarily and at their own risk in all activities connected with this event and I assume all risks of injury and damage arising out of the conduct of such activities. I understand that this means that I agree not to sue the "RELEASED PARTIES" for any injury or resulting damage to myself or my property arising from, or in connection with, said event. I understand that entrant and/or passenger must be 21 years of age to participate in the Ride to Remember Motorcycle Run.

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 made by the "RELEASED PARTIES."*

Signature _____ Date _____

PAID CHECK # _____ CASH _____ CREDIT CARD/ONLINE PAYMENT _____