



**Palmer Divide Moto Riders (*a PDVR Legacy*)
Member Application and Liability Release**

Name: _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: (____) _____ **Cell Phone:** (____) _____

Date of Birth: _____ **Age:** _____

Email Address: _____

Emergency Contact Name & Number: _____

In consideration of being granted membership in the Palmer Divide Moto Riders (*a PDVR Legacy*) and in consideration of being permitted to participate in any and all Palmer Divide Moto Riders (*a PDVR Legacy*) sponsored functions and activities (collectively the "Events"), I agree to the following:

- 1. Liability Release and Assumption of Risk.** I understand that my participation in an Event can expose me to dangers and unanticipated risk, including, but not limited to, risk associated with riding my motorcycle to, from or during an Event or interaction with other persons. I willingly and voluntarily assume all such risks, including loss, damage or injury, including death, to myself and/or my property. Moreover, acknowledging that such risk exists, I, and my estate in the event of my death, hereby release, discharge and hold harmless the Palmer Divide Moto Riders (*a PDVR Legacy*), its Owners, Officers, Board Members, Ride Coordinators, Members, Volunteers and Affiliates (collectively the "Released Parties") from liability in the event of my injury, death or damage to my property.
- 2. Indemnification.** I agree to indemnify and hold harmless the Released Parties, individually and/or collectively, from all lawsuits, claims, damages, costs and attorneys' fees which arise out of my presence or conduct at an Event. Because it is my intention, to the fullest extent of the law, to release and protect from any liability the Released Parties,

I agree that I, and my estate in the event of my death, will indemnify and hold harmless the Released Parties. I understand this release is intended to protect the Released Parties from any potential claims made against them as a result of their association with the Palmer Divide Moto Riders (*a PDVR Legacy*). This application and release is not intended to indemnify or release individuals from personal claims for individual acts of negligence, recklessness or willful misconduct.

- 3. Insurance Responsibility.** I understand that the Palmer Divide Moto Riders (*a PDVR Legacy*) does not provide health and/or life insurance. If I do not have insurance I deem appropriate, I agree that I should not participate in an Event. I assume all responsibility for my doctor and/or hospital expenses and any loss or injury to personal property or myself in which I may become involved in by reason of participating in an Event.

WAIVER OF RIGHTS UNDER STATE STATUTES

I further agree to waive all benefits flowing from any state statute which would negate or limit the scope of this Release and Indemnification Agreement.

Notice:

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 of Member

Printed Name of Member

If the rider listed above is under the age of 18:

Signature of Parent or Legal Guardian

Printed Name of Parent or Legal Guardian