

Black Mountain Motorcycle Club, Inc.
Guest Release and Waiver of Liability and Indemnity Agreement

IN CONSIDERATION for and being permitted to participate in the Black Mountain Motorcycle Club, Inc. events,

THE UNDERSIGNED:

HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the Black Mountain Motorcycle Club, Inc., its related companies, the officers, directors, management, officials, ride captains, members and volunteers assisting in the events, the sanctioning organization or any subdivision thereof, grounds operators, grounds owner, officials, promoters, sponsors, advertisers; owners and lessees of premises used to conduct the events and each of them, their officers and employees, all for the purpose herein referred to as "releasees" from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any and all loss or damage, and any claim or demands therefore on account of injury to the person or property or resulting in the death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is participating in the events.

EACH OF THE UNDERSIGNED expressly acknowledges and agrees that the activities of the event are dangerous and involve the risk of serious injury and/or property damage.

EACH OF THE UNDERSIGNED further expressly agrees that the forgoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the State in which it is operated in and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full force and effect.

EACH OF THE UNDERSIGNED has read, understands and voluntarily signs this *Release and Waiver of Liability and Indemnity Agreement*, and further agrees that no oral representations, statements or inducements apart from the forgoing written agreements have been made.

THE UNDERSIGNED RIDER herewith certifies that he/she is in possession of a valid motorcycle license and motorcycle insurance and assumes all responsibility that such documents are current and recognized by the state in which the ride is being conducted by the BMMC.

Please Print Clearly

Name of Rider _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Emergency Contact Name & Phone Number _____

Name of Passenger _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Emergency Contact Name & Phone Number _____

Signature of Rider _____ **Date** _____

Signature of Passenger _____ **Date** _____