Elizabeth E Carter RIDING WAIVER

READ CAREFULLY: THIS SECTION IS A LEGAL RELEASE, ASSUMPTION OF RISK, WAIVER AND

COVENANT NOT TO SUE AGREEMENT.

I.______fully understand and acknowledge that operating or riding on a motorcycle/scooter is an activity that has its own unique risks, and that serious injury or death could result from operating or riding on the motorcycle/scooter. I am voluntarily participating in the lesson(s). I EXPRESSLY AGREE TO ASSUME THE ENTIRE RISK OF ANY ACCIDENT, PROPERTY DAMAGE, OR PERSONAL INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH, THAT I MIGHT SUFFER AS A RESULT OF MY OPERATING OR RIDING ON THE MOTORCYCLE/SCOOTER AND PARTICIPATING IN THE LESSON(S). ____(initial)

I will operate the motorcycle/scooter in a safe manner. I will provide proof of a current/valid operator's license/permit in the state in which I reside and proof of current registration and insurance. I am currently not under the influence of alcohol, drugs, or any other illegal substances, or any medications that may impair my judgement or my ability to operate or ride on the motorcycle/scooter. _____(initial)

I agree to wear all recommended protective apparel and to operate the motorcycle/scooter according to all applicable laws. I have reviewed the on-product warning labels and instructional materials for each product. _____(initial)

I have examined the motorcycle/scooter, and had an opportunity to ask questions regarding the operation of the motorcycle/scooter. _____(initial)

I agree to operate or ride on the motorcycle/scooter safely, defensively, and within the limits of the law and my ability regardless of the routes during the lesson(s). _____(initial)

Signed:		Date:
Please Print		
First Name:		Middle Initial
Last Name:		
Street Address:		
City:	State:	Zip:
Phone:		
Witness:		Date:

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration of Elizabeth E. Carter, I agree as follows:

I,	on behalf of myself, my personal	
representative and my heirs, agree to hold harm	less, defend and indemnify the lesson p	provider
from any and all claims, suits or causes of actio	n by others for bodily injury, property d	lamage, or
other damages which may arise out of my use o	f a motorcycle and/or motorcycle equip	ment or
my participation in a motorcycle lesson, includi	ng claims arising from the lesson.	(initial)

I have read this indemnification and hold harmless agreement and by signing I agree it is my intention to accept legal responsibility and pay for any loss for claims or lawsuit against the above-named provider arising from my participation in a motorcycle riding lesson.

Sign:	Date:
Please Print	
First Name:	Middle Initial
Last Name:	
Street Address:	
City:	State:
Zip:	
Phone:	
Email:	
Witness:	Date: