

Sober Not Dead Motorcycle Club

Club Waiver Agreement

www.SoberNotDead.org

The undersigned, (on my own behalf and on behalf of my heirs, personal representatives, successors and assigns), for and in consideration of the opportunity to participate in a "Ride", "Poker Run", "Rally", "Field Event", "Bike Show", or "Activity" (hereafter known as **EVENT(S)**) do hereby agree to indemnify and hold harmless, the Sober Not Dead Motorcycle Club, their officers, employees, agents, volunteers, and sponsors (hereinafter, the "**RELEASED PARTIES**") from and against claims, actions, suits, losses, damages, and liabilities, including attorney fees and cost of defense, arising from any contention or allegation, whether well founded or otherwise, based on any acts of conduct by said parties, which are reasonably necessary to effectuate the purpose of said activity and/or events.

I, FULLY UNDERSTAND THAT THIS MEANS THAT I AGREE NOT TO SUE ANY OR ALL OF THE "RELEASED PARTIES" FOR ANY INJURY RESULTING TO MYSELF OR MY PROPERTY ARISING FROM, OR IN CONNECTION WITH THE PERFORMANCE OF THEIR DUTIES IN SPONSORING, PLANNING OR CONDUCTION THE EVENTS.

Further more I certify that I am experienced in and familiar with the operation of motorcycles and fully understand the risks and dangers inherent in motorcycling. I am voluntarily participating in the **EVENTS(S)** and I expressly agree to assume the entire risk of any accidents or personal injury, including death, which I might sustain to my person and property as a result of my participation in the **EVENT(S)** and any negligence (except willful neglect) on the part of any or all of the "**RELEASED PARTIES**" in performing their duties.

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, including but not limited to Section 18542 of the California Civil Code.

By signing this **Release**, I certify that I have read this **Release** and fully understand it.

NOTE: If Under 18 Years of Age, Signature of Parent or Guardian is Required

Name : _____

(Please Print Full Name)

Signature: _____ Date: _____ Time: _____

Witness: _____ Date: _____ Time: _____