



# The American Legion Riders of Maine Post 1, Rockland, Maine Event Waiver Form

(Please make sure this form is filled out completely.)

**About You:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Preferred Name/Nickname: \_\_\_\_\_

Home Address: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ email address: \_\_\_\_\_

Check one:  ALR Member Participant  Non-Member Participant

Emergency Contact Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**About your bike:** Make: \_\_\_\_\_ Model: \_\_\_\_\_ Displacement: \_\_\_\_\_

**About the lawyers:** Check the box alongside the appropriate statement below, draw a large "X" through the statement that does not apply to you, and sign and date BOTH sections. If you will not be operating a motorcycle, also put a large "X" through the "About your bike" section above.

"I, the undersigned, certify that the motorcycle listed above is legally registered in accordance with state, city, and/or local licensing and registration requirements. I further certify that I carry property and liability insurance for myself, my passengers, and the motorcycle which meets at least the minimum state, city, and/or local insurance requirements. I also certify that I carry a valid driver's license with either a cycle endorsement or a valid Motorcyclist Temporary Instruction Permit in accordance with state, city, and/or local laws. I further certify that I have the legal right to utilize the listed motorcycle. I accept full responsibility for my safety and conduct, and the safety and conduct of any who may be participating as my guest or passenger in this event. I realize that these are requirements for my participation in this event. "

"I am participating as a passenger of the following participant: \_\_\_\_\_, who has certified their compliance with requirements of the event via a separate waiver form. I will not be operating a motorcycle during this event, but am participating in this event as a passenger. " **ADMINISTRATIVE NOTE: Attach this form to the associated motorcycle operator's waiver form upon completion.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

"I, the undersigned, agree that the American Legion, and the American Legion Motorcycle Association (henceforth referred to as 'The American Legion Riders' or simply as 'Riders'), shall not be liable or responsible for damage to property or injury to persons including myself during this event, even where the damage or injury is caused by negligence (except willful neglect). I understand and agree that participation in this event is voluntarily, and is at my own risk. I release and hold the Riders officers and the American Legion harmless for any injury loss to my person or property that may result through my participation in this event. I understand that this means that I agree not to sue the Riders officers, whether local, state or national, nor the American Legion for any injury resulting to myself or my property in connection with this event."

Signed: \_\_\_\_\_ Date: \_\_\_\_\_