

Veterans for Veterans Bike Event

Event Release Form

Name of Event(s) Veterans for Veterans Motorcycle Event

Date November 6, 2010

Location Caddo Parish, Shreveport, Louisiana

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," Bike Games," or "Activity" (hereinafter, **EVENT(S)**) sponsored and/or conducted by event sponsors or coordinators or individual motorcycle clubs or motorcycle organizations, Overton-Brooks VA Medical Center and their representatives, officers, directors, employees, agents and volunteers, Veterans for Veterans, Inc. and their representative officers, directors, volunteers and agents, the City of Shreveport and their representatives, officers directors, employees, agents and volunteers, Riverpark Church and their representatives, officers, directors, employees, agents and volunteers, the City of Bossier and their representatives, officers directors, employees, agents and volunteers (hereinafter, the "**RELEASED PARTIES**") releases and hold harmless the "**RELEASED PARTIES**" from any and all legal claims and demands, rights and causes of action of any kind whatsoever which I now have or may have against the "**RELEASED PARTIES**" in any way resulting from, arising out of, or in connection with the performance of their duties and my participation in any said **EVENT(S)**.

This Release extends to any and all claims I have or later may have against the "**RELEASED PARTIES**" resulting from or arising out of their performance whether or not such claims result from negligence (except willful neglect) on the part of any or all of the "**RELEASED PARTIES**" with respect to the **EVENT(S)** or with respect to the conditions, qualifications, instructions, rules or procedures under which the **EVENT(S)** are conducted or from any other cause.

I 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 CHAPTER DUTIES IN SPONSORING, PLANNING OR CONDUCTING THE EVENT(S).

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 **EVENT(S)** and 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 in my participation in the events, and any negligence (except willful neglect) on the part of any or all of the "**RELEASED PARTIES**" in performing their chapter duties.

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.

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**."

THIS IS A RELEASE – READ BEFORE SIGNING

-Rider-

-Passenger-

Signature _____

Signature _____

Print Name _____

Print Name _____

Address _____

Address _____

City/State/Zip _____

City/State/Zip _____

Date _____

Date _____

THIS FORM MUST BE SIGNED AND RETURNED