

LAW ENFORCEMENT MEMORIAL BIKE RIDE

2010 Event Release Form

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," "Field Meet," or "Activity" (hereinafter referred to as EVENT), sponsored or conducted by BRUNSWICK POLICE DEPARTMENT, GLYNN COUNTY POLICE DEPARTMENT, GEORGIA STATE PATROL, CAMDEN COUNTY SHERRIFS OFFICE, KINGSLAND POLICE DEPARTMENT, BAKER COUNTY SHERRIFS OFFICE, NASSAU COUNTY SHERRIFS OFFICE, DUVAL COUNTY SHERRIFS OFFICE, ST. JOHNS COUNTY SHERRIFS OFFICE, FLORIDA HIGHWAY PATROL, as well as any other Law Enforcement agency and /or participating Businesses involved (hereinafter referred to as SPONSOR), releases and holds harmless SPONSOR from any and all claims, demands, rights and causes of action of any kind whatsoever, which I now have or later may have against SPONSOR, in any way resulting from, or arising out of or in connection with my participation in any said EVENT.

This Release extends to any and all claims I have or later may have against SPONSOR, whether or not such claims result from negligence (except willful neglect) on the part of the SPONSOR, with respect to the EVENT or with respect to the conditions, qualifications, instructions, rules or procedures under which the EVENT is conducted or from any other cause. I UNDERSTAND THAT I AGREE NOT TO SUE BRUNSWICK POLICE DEPARTMENT, BLUE KNIGHTS-GAXIV, BLUE KNIGHTS OR ANY OF THE LAW ENFORCEMENT AGENCYS AND/OR COMPANIES ABOVE FOR ANY INJURY RESULTING TO MYSELF OR MY PROPERTY ARISING FROM, OR IN CONNECTION WITH THE PLANNING, PARTICIPATION, OR CONDUCTING THE EVENT. Ride begins and ends at THE STELLAR CONFERENCE CENTER, starting at 10:00 a.m. on Saturday, SEPTEMBER 18TH, 2010.

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 EVENT and I expressly agree to assume the entire risk of any accidents, personal injury, including death, which I might sustain to my person and property as a result of my participating in the EVENT, and any negligence (except willful neglect) on the part of the SPONSOR in connection with the EVENT.

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.

By signing this Release, I certify that I have read this Release and fully understand it and I am not relying on any statements or representations made by SPONSOR. I fully understand that I have the right to have this Release reviewed by an attorney before signing.

THIS IS A RELEASE – READ BEFORE SIGNING

RIDER

Print Name _____

Address _____

City/ST/Zip _____

Email _____

Date _____

Signature _____

PASSENGER

Print Name _____

Address _____

City/ST/Zip _____

Email _____

Date _____

Signature _____

ASSIGNMENT OF RIGHTS

CONSENT TO PUBLICATION AND RELEASE – PHOTOGRAPHS

The undersigned consents to the use by SPONSOR of my name, photo, voice, likeness, and biographical information for promotional advertising, marketing and other business purposes without additional consideration.

Further, I understand that by execution of Assignment, I am relinquishing all rights to such photographs and to any future compensation for publication, use or sale of same. Company shall have the right to publish same in any medium, including but not limited to, reproduction of same magazines, newspapers, e-mail and the Internet. I do not retain the right to view or approve such photographs prior to publication by Company.

Further, I do hereby release Company and its agents, employees, successors and assigns, from any and all liability for the ownership, publication and use of such photographs. This Agreement applies to all photographs taken of me between 9/18/10 and 9/20/10.

Signature _____

Date _____

Signature _____

Date _____

Payment: Card type: AMEX MC VISA CASH CHECK

Rider: \$20

Passenger: \$ 5

Passenger t-shirt \$15

Card Number: _____

Expiration Date: _____ / _____

TOTAL: \$ _____