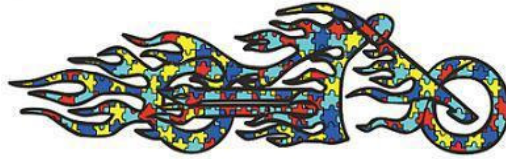


Ride For Autism



EST. 2005

Sixth ANNUAL "RIDE FOR AUTISM"

BENEFIT RIDE

PRE-REGISTRATION EVENT & WAIVER/RELEASE FORM

SATURDAY, AUGUST 7, 2010

Location: EAST -Southfield Civic Center (26000 Evergreen Road, Southfield, MI 48076), WEST –Livingston Masonic Lodge #76 (210 Mann St. Pickney, MI 48169) and points beyond to Biker Bob's Harley-Davidson (14100 Telegraph Road, Taylor, MI 48180)

The undersigned (on my 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 Meet" or "Activity" (hereinafter, **EVENT(S)**) sponsored and/or conducted by Ride For Autism, Southfield Civic Center, UAW Local 245, TDM, 24/7 Bail Bonds, Masonic Lodge #76, Autistic Society, Harley-Davidson, Inc., Harley-Davidson Motor Company, the Harley Owners Group, Authorized Harley-Davidson dealer(s) including Motown Harley-Davidson, Inc. DBA Biker Bob's Harley-Davidson and/or local H.O.G. chartered chapter(s), and their respective officers, directors, employees, sponsors, and agents (hereinafter, the "**RELEASED PARTIES**") releases and holds harmless the "**RELEASED PARTIES**" from any and all claims and demands, rights and causes of action of any kind whatsoever which I now have or later may have against the "**RELEASED PARTIES**" in any way resulting from, arising out of, or in connection with the performance of their chapter 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 of their chapter duties, whether or not such claims result from negligence 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 EVENTS.

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 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 participating in the events, and any negligence which I might sustain to my person and property as a result of my participating 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 negate or limit the scope of this release and Indemnification Agreement, including but not limited to Section 1542 of the California Civil Code which provides:

"A general release does not extend to the claims which the creditor does not know or suspect to exist in his favor at the time of executing this release, which if known to him must have materially affected his settlement with the debtor."

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 (over)

RIDER/INDEMNITY

RIDER

PASSENGER

\$30.00 for Rider (Must be an adult)

\$20.00 for Passenger (Minors –separate release form will be necessary)

Signature _____

Signature _____

Print Name _____

Print Name _____

Address _____

Address _____

City/State/Zip _____

City/State/Zip _____

Date _____

Date _____

CIRCLE ONE STYLE AND SIZE

CIRCLE ONE STYLE AND SIZE

T-Shirt or Ladies Tank Top

T-Shirt or Ladies Tank Top

S – M – L – XL – 2XL – 3 XL – 4XL

S - M - L - XL - 2XL - 3XL - 4XL

Please circle the location you will be starting from:

WEST STARTING POINT

EAST STARTING POINT

Livingston Masonic Lodge #76

Southfield Civic Center

210 Mann St Box 107

2600 Evergreen Rd

Pinckney, Michigan 48169

Southfield, Michigan 48076

Signature of Parent of Guardian for Underage Participants _____

E-Mail Address _____

- **Make checks payable to Ride For Autism**
- **Mail completed form and payment to:
RIDE FOR AUTISM
PO Box 40346
Redford, MI 48239**

