

MAY-DAY EVENT RELEASE OF LIABILITY

Last Name: _____ First Name: _____ MI: _____

Road Nickname: _____

Street Address: _____ Apt #: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____

Release of Liability:

In consideration of the acceptance of my application for entry in and voluntary participation in the Peace Officers Memorial Group of Stanislaus County (POMG) May Day Ride, I hereby freely agree to and make the following contractual representations and agreements.

I understand the activities involved in the POMG May Day Ride and represent to the administrators of the May Day Ride that I am physically fit to perform such without any threat to my health or safety. I fully realize the dangers of participating in the POMG May Day Ride and fully assume the dangers and risks, whether obvious or latent, associated with such participation. I also agree to participate in accordance with the rules and judgments of the officials and understand that officials' decisions in all matters are final.

I hereby waive, release and discharge for myself, my heirs, legal representatives, and successors in interest (hereinafter collectively "successors") any and all rights and claims which I have or which may hereafter accrue to me against the administrators of this event, the Modesto Police Department, City of Modesto, Peace Officer Memorial Group, sponsors and its personnel, and all other persons or entities, including, without limitations, any claims for injury, including death, and for any damage to property arising out of or in any way related to the POMG May Day Ride or my participation in the POMG May Day Ride.

I agree for myself and successors that the above representations are contractually binding and are not mere recitals and that should I or my successors assert my claim in contravention of this agreement, I or my successors shall be liable for the expenses (including legal fees) incurred by the other part or parties. This agreement may not be construed as modification of any of the provisions herein or consent to any subsequent waiver or modification.

I currently hold a valid drivers license with proper endorsement, and I have comprehensive motor vehicle liability insurance covering the vehicle on which I will be operating on the MAY-DAY RIDE.

I also agree to allow the administrators and sponsors of the POMG May Day Ride to use my name and likeness in a photo or on videotape for promotional purposes or media releases.

Completion of this form constitutes my signature and acknowledgement of my agreement to the conditions of this document.

Rider/Participant _____ Date _____

Emergency Medical Information and Bike Disposition Information, along with emergency contacts, are the responsibility of the individual and should be carried at all times on your person and bike.