

CASCADE FAMILY MOTORCYCLE CLUB EVENT WAIVER RELEASE FORM

NAME: _____ DATE: _____

AGE: _____ CLASS: _____

STREET: _____ CITY: _____ State: _____ ZIP: _____

THIS IS A RELEASE AND IMDEMNITY AGREEMENT, *READ IT BEFORE SIGNING IT*

I hereby relinquish any and all rights to sue or make claim whatsoever against the Port Blakely Tree Farms, Cascade Family Motorcycle Club, or its members, the promoters, sponsors, and all other persons, or organizations conducting or connected with this event for any injury to property or person I may cause, including crippling injury or death, whether such injury arises while I am preparing for or participating in the event or while I am on the event premises.

I know the risks of personal injury to myself and damage to my property while participating in this event, and while on the event premises, and, relying on my own judgement and ability, assume all such risks of loss, and hereby agree to reimburse all costs to those persons or organizations connected with this event for damages incurred as a result of any injury that I cause or receive.

I HAVE READ AND UNDERSTAND THIS RELEASE

This is a RELEASE

_____ DATE: _____

SIGNATURE OF PARTICIPANT

This is a RELEASE

_____ DATE: _____

SIGNATURE OF PARENT OR LEGAL GUARDIAN