NCMSEP - MOTORCYCLE SAFETY COURSE

GENERAL RELEASE, WAIVER & INDEMNIFICATION AGREEMENT Revision 5/2023

Full Name:				
Street Address:				
City, State, Zip				
Геlephone: ()				
Oriver's License No. and State:			Birthdate:/	
Do you have a motorcycle endorsemen	nt on your license? Yes	No	MM DL Do you have a Learner's Per	mit?
Both sections of this form must be complete	ed and signed prior to your first	class. You	r instructor will collect it during the fi	rst session.
n consideration for The North Carolina Con Motorcycle Safety Foundation, Inc. (MSF), to occurs, including each of their affiliates, sub Released Parties"), furnishing services, eq Safety Course (the "Course"), the undersig	the training sponsor, the owner osidiaries, members, employee uipment, and/or curriculum and	of the trair s, officers, d permitting	ning motorcycle and premises upon v coaches, instructors, aides, and/or a the undersigned to participate in thi	which training gents (the
Participation in the Course requires physical or mental limitations and have not performance in the Course. Participants up the training location, or the parent/guarent.	used any form of alcohol, or pr inder 18 years of age must ha	escription of ave this fo	or non-prescription drugs that could i	mpair my IN PERSON
fully understand and acknowledge that (a) state of North Carolina; (b) I have been advall rights and benefits flowing from any state eleases contained herein; (c) if any portion notwithstanding, continue in full force and lequestions about it, and I fully understand its	ised of and agree to waive, on e statute that would otherwise I of this Agreement is held inval egal effect; and (d) I have had t	behalf of m imit the sco lid or legally	nyself, my personal representatives a ope of this Agreement or the underta y unenforceable, then the balance sh	and my heirs, kings and nall,
READ CAREFULLY: THIS IS A GENE	RAL RELEASE, WAIVER,	ASSUMP	TION OF RISK & COVENANT N	NOT TO SUE
fully understand and agree that: (a) there as the Course and use of motorcycles and motorcycling activities may result in injury of PARTIAL OR TOTAL PARALYSIS, OTHER and dangers may be caused by negligence or unforeseeable causes; and (d) by participate presentatives and my heirs, hereby known he Released Parties for any injuries, loss Released Parties, or any other person. If I is damage that occurs to or from my motorcycling.	notorcycling equipment ("Motor r illness including, but not limite R AILMENTS THAT COULD C of Released Parties, other Coupating in the Course and Motor owingly and voluntarily assumes and/or damages, including have brought a motorcycle or her release.	rcycling Act ed to, BOD CAUSE SEI urse particip cycle Activ ime all risk ing those can helmet to us	tivities"); (b) my participation in the C ILY INJURY, DISEASE, STRAINS, RIOUS DISABILITY, AND DEATH; pants, or others, and may arise from ities, I, on behalf of myself, my per as and all responsibility, and agree used solely or in part by negligence	course and FRACTURES, (c) these risks foreseeable sonal to release of the
fully understand and agree that, on behalf elinquishing any and all rights I now have of death, whether known or unknown, that I madelaims based on the Released Parties' negl	or may have in the future to suc ay suffer arising from the Cour	the Relea	sed Parties for any and all injury, da	mage, or
HAVE READ THIS RELEASE AGREEME ALL RISKS AND RELEASE THE ABOVE- DAMAGE OR WRONGFUL DEATH CAUS	NAMED RELEASED PARTIES	S FROM LI	ABILITY FOR PERSONAL INJURY	
Participant Name (Printed) – First, Middle, Last	License or ID# and State		Participant Signature	Date

Relationship

License or ID# and State

Date - MM/DD/YYYY

Parent/Legal Guardian signature, if Participant under 18 years of age

READ CAREFULLY: THIS IS AN INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration for The North Carolina Community College System, Lenoir Community College, the Sponsoring Community College, Motorcycle Safety Foundation, Inc. (MSF), the training sponsor, the owner of the training motorcycle and premises upon which the training occurs, including each of their affiliates, subsidiaries, members, employees, officers, coaches, instructors, aides, and/or agents (the "Released Parties"), furnishing services, equipment, and/or curriculum and permitting the undersigned to participate in this Motorcycle Safety Course (the "Course"), the undersigned participant agrees to all of the following:

I, on behalf of myself, my personal representatives and my heirs, agree to hold harmless, defend, and indemnify the Released Parties from any and all claims, suits, or causes of action by any third parties, including Released Parties or other Course participants, for bodily injury, property damage, or other damages that may arise out of my use of motorcycles and motorcycle equipment or my participation in the Course, including claims arising from the negligence of Released Parties, other Course participants, or any other party.

I HAVE READ THIS AGREEMENT AND BY SIGNING BELOW, I AGREE TO THE ABOVE TERMS, AND TO ACCEPT LEGAL RESPONSIBILITY AND PAY FOR ANY LOSS FOR CLAIMS OR LAWSUITS AGAINST THE ABOVE-NAMED RELEASED PARTIES ARISING FROM MY PARTICIPATION IN THE COURSE.

I have had th and meaning	e opportunity to ask any and al	I questions about th	is indemnification	and hold harmless section an	d I understand its terms
Participant Name (Printed) – First, Middle, Last		License or ID# and State		Participant Signature	Date
Parent/Legal G	Guardian signature, if Participant un	der 18 years of age	Relationship	License or ID# and State	Date – MM/DD/YYYY
		USING YOUR O	OWN MOTORCY surance Informat		
	Make of Motorcycle				
	Insurance Company				
	Policy Number				
	I UNDERSTAND THAT PERSONAL MOTORC OF MY PARTICIPATIO	YCLE OR EQUIP	MENT THAT M	AY OCCUR AS A RESULT	г
	Signature		Date	MM DD YYYY	
	EM	ERGENCY CO	ONTACT INFO	DRMATION	
	Please list the na	mes and phon	e numbers of	two emergency contac	ots.
Name: _			Phone	e No	
Name:			Phone	e No	