## **HELL TO PARADISE PTSD AWARENESS RIDE**

## **RELEASE & INDEMNIFICATION AGREEMENT**



**EVENT:** ALR Hell to Paradise Ride 2024

**DATE**: July 26-28, 2024

LOCATION: American Legion Riders of Michigan | Various locations along the ride route

## THIS IS A RELEASE - READ BEFORE SIGNING

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 the above-referenced "Ride," "Rally," and/or "Activity" (hereinafter, EVENT) sponsored and/or conducted by <u>American Legion Riders of Michigan</u>, and their respective officers, directors, employees, volunteers, 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 duties to hold the EVENT and my participation in said EVENT.

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 duties whether or not such claims result from negligence (except willful neglect) on the part of any or all of the "RELEASED PARTIES" 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 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 ANY DUTIES IN SPONSORING, PLANNING, OR CONDUCTING THE EVENT.

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 or personal injury, including death, which I might sustain to my person and property as a result of my participation in the event, and any negligence (except willful neglect) on the part of any or all of the "**RELEASED PARTIES**."

## **WAIVER OF RIGHTS UNDER STATE STATUTES**

I further agree to waive all benefits flowing from any state statute that would negate or limit the scope of this **Release and Indemnification Agreement**, including but not limited to 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 below, 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."

<u>Driver</u>	<u>Passenger</u>
Signature	Signature
Print Name	Print Name
Address	Address
City/State/Zip	City/State/Zip
Date	Date

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