



## Oktoberfest Motorrad Tour Waiver Form

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Passenger Name: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

Received Motarrad Tour Packet: Yes [ ] No [ ] Initial: \_\_\_\_\_

In consideration of my signing this agreement, I hereby for myself, my heirs and administrators assume any and all risk which might be associated with the event. I waive and release any and all rights and claims for damages which I may have against the organizers and any others connected with this event, their representatives, successors and assigns for any and all injuries or damages of any kind whatsoever suffered by me or caused by me, as a result of taking part in the event and any related activities. In signing this I also acknowledge that I have a current motorcycle license and insurance.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Passenger Signature: \_\_\_\_\_ Date: \_\_\_\_\_