Michigan Sport Touring Riders 2025 New Rider

ACTIVITY FEE & RELEASE FORM

Submit completed form with payment to:

Michigan Sport Touring Riders c/o Jim Hull 6491 Link Blvd Indian River, MI 49749

Please Print Legibly Name _____ Address 1 Address 2 ______ State / Province ZIP / Postal Code _____ Primary Phone ______ [] Check if Cell # Secondary Phone ______ [] Check if Cell # Email Address Recruited By _____ I would like to have my name, email address, and cell phone in the 2025 MSTR directories. I agree that I will not share the directory with anyone outside of the Michigan Sport Touring Riders, and I understand that I will not receive a copy of the directory if my name is not included in the directory. _____ initial Your participation in the Michigan Sport Touring I have read and agree to Riders activity group will be valid through the end of the 2025 calendar year, at which time a new the terms and conditions Activity Fee and Release Form will become available for your renewal. for membership in the Annual Activity Fee: \$20.00 **Michigan Sport Touring** Riders as shown on page) Check () Cash 2 of this form. Submit your payment with the completed signed form. Make checks or money orders payable to: **Michigan Sport Touring Riders** Signature - REQUIRED If submitting by mail please use the address that appears above. Date - **REQUIRED**

Rev: 10/20/2024

MICHIGAN SPORT TOURING RIDERS WAIVER & INDEMNIFICATION AGREEMENT

In consideration for the **Michigan Sport Touring Riders**, a Michigan not-for-profit corporation, including each of its employees, directors, officers and/or agents, permitting the undersigned to become a member of the **Michigan Sport Touring Riders**, the undersigned agrees to all of the following:

Participation in motorcycle riding and other activities of the **Michigan Sport Touring Riders** requires physical stamina, motor coordination, and mental alertness. I hereby attest that I have no known physical or mental limitations and will not use any form of alcohol, prescription or non-prescription drugs that could impair my performance in activities in the **Michigan Sport Touring Riders.**

I fully understand and acknowledge that (a) this Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Michigan (b) if any portion of this Agreement is for any reason held invalid or legally unenforceable, then the balance shall, notwithstanding, continue in full force and legal effect; and (c) I have had the opportunity to ask any questions about this Agreement and I fully understand its terms and meaning.

READ CAREFULLY: THIS IS A LEGAL RELEASE, ASSUMPTION OF RISK, WAIVER, AND COVENANT NOT TO SUE AGREEMENT

I fully understand and acknowledge that: (a) there are **DANGERS AND RISK OF INJURY, DAMAGE, OR DEATH** that exist in my use of motorcycles and motorcycle equipment and activities of the **Michigan Sport Touring Riders** including motorcycling and social activities; (b) my participation in such activities may result in injury or illness including, but not limited to, **BODILY INJURY, DISEASE, STRAINS, FRACTURES, PARTIAL OR TOTAL PARALYSIS, OTHER AILMENTS THAT COULD CAUSE SERIOUS DISABILITY, OR DEATH**; (c) these risks and dangers may be caused by the negligence of the **Michigan Sport Touring Riders** or its officers, directors or agents or the negligence of others, including members or non-members of the **Michigan Sport Touring Riders** and may arise from foreseeable or unforeseeable causes; and (d) by participating in these activities **I, on behalf of myself, my personal representatives** and my heirs, hereby knowingly and voluntarily assume all risks and all responsibility, and agree to release the **Michigan Sport Touring Riders** and its employees, directors, officers and/or agents for any injuries, losses and/or damages, including those caused solely or in part by the negligence of the of said persons or any other person. I also agree that this release applies to any damage or loss that occurs to my motorcycle or riding equipment.

I agree and understand that, on behalf of myself, my personal representatives and my heirs, I hereby covenant not to sue, and am relinquishing any and all rights I now have or may have in the future to sue the **Michigan Sport Touring Riders** or its officers, directors or agents for any and all injury, damage, or death I may suffer arising from motorcycle riding or its equipment, including claims based on the negligence of the **Michigan Sport Touring Riders** or its officers, directors or agents.

I HAVE READ THIS AGREEMENT AND BY SIGNING ON THE REVERSE I AGREE TO ASSUME ALL RISKS AND RELEASE THE MICHIGAN SPORT TOURING RIDERS AND ITS OFFICERS, DIRECTORS OR AGENTS FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

READ CAREFULLY: THIS IS AN INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

I, on behalf of myself, my personal representatives and my heirs, agree to hold harmless, defend, and indemnify the **Michigan Sport Touring Riders** its officers, directors or agents from any and all claims, suits, or causes of action by others for bodily injury, property damage, or other damages which may arise out of my use of motorcycles and motorcycle equipment or my participation in activities, including claims arising from the negligence of the **Michigan Sport Touring Riders** or its officers, directors or agents.

I HAVE READ THIS AGREEMENT AND BY SIGNING I AGREE TO ACCEPT LEGAL RESPONSIBILITY AND PAY FOR ANY LOSS FOR CLAIMS OR LAWSUITS AGAINST THE MICHIGAN SPORT TOURING RIDERS AND ITS OFFICERS, DIRECTORS OR AGENTS ARISING FROM MY PARTICIPATION IN THE ACTIVITIES OF THE MICHIGAN SPORT TOURING RIDERS

READ CAREFULLY: MEMBERSHIP IN MICHIGAN SPORT TOURING RIDERS

I accept membership in the Michigan Sport Touring Riders, a State of Michigan not-for-profit corporation. I understand that the liability of volunteer directors or volunteer officers for money damages has been eliminated for this corporation by Michigan Statute.

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