



1ST ANNUAL WILD WEST DAYS MOTORCYCLE RUN

SATURDAY NOVEMBER 5TH 2016 MOTORCYCLE RIDE REGISTRATION FORM

Registration/Check-In 7:30 a.m. at CLS Cycle, 37420 N Cave Creek Rd, Cave Creek, AZ 85331 Ride Starts at 8:30 a.m. sharp.

Lunch and Silent Auction to follow at the Roadhouse 6900 E Cave Creek Rd, Cave Creek, AZ 85331

Participant Rider Name:				_
Address:				_
City:		State:	Zip Code:	_
Phone:	Email:			
Emergency Contact:				_
Passenger: Yes No				
Passenger Name:				_
Address:				_
City:		State:	Zip Code:	_
Phone:	Email:			
Emergency Contact:				_

Questions: Contact Cameron at CLS Cycles (480) 595-0759

Please send filled out registration form and waiver to: wildwest days 2016 @gmail.com

Please read carefully the release and waiver of Liability on the following page before signing

RELEASE AND WAIVER OF LIABILITY AND INDEMINITY AGREEMENT:

In consideration of the acceptance of my entry in this event, I do for myself, my heirs, executors, administrators, and assigns, hereby give up, RELEASE, and DISCHARGE in advance my rights to sue or make any claim for damages due to negligence or carelessness against Officers, Directors, members, and agents, other promoters, sponsors, and their employees; and all organizations and their employees conducting or connected with Wild West Days Bike Run for injury to person that I may suffer, including crippling injury or death, while participating in the event and while upon event premises.

I AM AWARE THAT MOTORCYCLING CARRIES A SIGNIFICANT RISK OF SERIOUS PERSONAL INJURY, DEATH, AND PROPERTY DAMAGE. I know the risks of danger to myself, my minor child (if present), and my property while participating in the event and while upon the event premises and relying upon my own judgement and ability. I ASSUME ALL SUCH RISKS INDEMINFY, all persons and entities identified above, generally and specifically, from any and all liability for death and/or personal injury or property damage in any way from my participation in this event.

Rider Signature:	Date:
Decreased Circustum	Data
Passengerd Signature:	Date:

Please send filled out registration form and waiver to: wildwestdays2016@gmail.com