



NEW HAMPSHIRE GOLD STAR MOTHERS
Memorial Association

*Fund Raiser Motorcycle Rally
 Registration & Release Form*

Location Start: Nault's Honda – 420 2d Street, Manchester, NH 03102 **(800-366-7220)**
Date: October 20, 2007 **Time:** Registration 9:00 am
Festivities Veterans Park, Manchester New Hampshire 1:00 pm

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 a "Ride", "Rally", (hereinafter referred to as **event(s)**) sponsored by the **New Hampshire Gold Star Mothers Memorial Association (NHGSMMA)**, releases and holds harmless the "**NHGSMMA**" from any and all claims, and demands, rights and causes of any action of any kind whatsoever which I now have against the "**NHGSMMA**" in any way resulting from and/or arising out of in connection with the performance of their association duties and my participation in any said **event(s)**.

This release extends to any and all claims I have or later may have against the "**NHGSMMA**" resulting from or arising out of their performance of their association duties whether or not such claims result from negligence (except willful neglect) on the part of any or all of the "**NHGSMMA Parties**" with respect to the event(s) or with respect to the conditions, qualification, instructions, rules or procedures under which the event(s) are conducted or from any other cause. I UNDERSTAND THAT THIS MEANS THAT I AGREE NOT TO SUE ANY OR ALL OF THE "NHGSMMA PARTIES" FOR ANY INJURY RESULTING TO MYSELF OR MY PROPERTY ARISING FROM, OR IN CONNECTION WITH, THE PERFORMANCE OF THEIR ASSOCIATION DUTIES IN SPONSORING, PLANNING OR CONDUCTING THE EVENTS.

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(s)** 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(s)**, and any negligence (except willful neglect) on the part of any or all of the "**NHGSMMA**" in performing their association duties.

WAIVER OF RIGHTS UNDER STATE STATUTES

I further agree to waive all benefits flowing from any state statute which would negate or limit the scope of this release and Indemnification Agreement.

By signing this Release, I certify that I have read this Release and fully understand it and that I am not relying on any statements or representation made by the "**NHGSMMA.**"

******THIS IS A RELEASE – READ BEFORE SIGNING******

RIDER		PASSENGER	
Signature		Signature	
Print name		Print Name	
Address		Address	
City/State/Zip		City/State/Zip	
Date		Date	
Would you like to be contacted about future NHGSMMA events?		Would you like to be contacted about future NHGSMMA events?	
Yes / No		Yes / No	
Email Address		Email Address	