

READ CAREFULLY

WAIVER AND RELEASE OF LIABILITY

In consideration of **FLORIDA SAFETY COUNCIL**; furnishing services and/or equipment to enable me to participate in the Motorcycle Rider Education Class, I agree as follows:

I fully understand and acknowledge that: (a) risks and dangers exist in my use of motorcycles and motorcycle equipment and my participation in the Motorcycle Rider Education Class activities; (b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employers, officers or agents of **FLORIDA SAFETY COUNCIL**; the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. These risks and dangers may arise from foreseeable or unforeseeable causes; and (d) by my participation in these activities and/or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence of other conduct of the owners, agents, officers, or employees of **FLORIDA SAFETY COUNCIL**; or by any other person.

Initial _____

I, on behalf of myself, my personal representatives and my heirs hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify **FLORIDA SAFETY COUNCIL**; and its owners, agents, officers, and employees from any and all claims, suits or causes of action for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of motorcycles and motorcycle equipment or my participation in the Motorcycle Rider Education Class activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by **FLORIDA SAFETY COUNCIL**; or by any other person.

Initial _____

I HAVE READ THE ABOVE WAIVER AND RELEASE BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE FLORIDA SAFETY COUNCIL; FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH, CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

PRINT NAME

DATE OF BIRTH

SIGNATURE

DATE

**SIGNATURE OF PARENT OR GUARDIAN
(If less than 18 years old)**

DATE