

RIDER NAME \_\_\_\_\_ DATE \_\_\_\_\_

**2009 ECEA Minor Release and Indemnity Form – AMA Sanctioned Events**

IN CONSIDERATION of my minor child ("the Minor") being permitted to participate in any way in the EVENT(S) and/or being permitted to enter for any purpose any RESTRICTED AREAS(S) (defined to be any area which requires special authorization, credentials or permission to enter or any area to which admission by the general public is restricted or prohibited), I agree that:

I hereby release, discharge, covenant, Not to sue or make any claim whatsoever against the American Motorcycle Association and its districts organizations, the American All Terrain Association, the promoters, sponsors and all other persons or organizations conducting or connected with this event for a injury to property or persons or my minor may suffer, including injury or death, whether such injury arises while I or my minor are preparing for or my minor's participating in the event or while I or my minor are upon the event.

I know the risks of danger to my minor and my property whom is participating in the event and while upon the event premises and relying upon my own judgment and my minor's ability, assume all such risks of loss and hereby agree to reimburse all costs to those persons or organizations connected with this event for damages incurred as a result of any injury that I or my minor may cause or receive. I agree to instruct my minor of the said dangers of his/her participation and will withdraw their participation if they feel unsafe I any way during the event or while on the premises.

I understand that ECEA events are subject to AMA rules. It is understood and agreed that in the event that if my minor is injured from whatsoever cause during an event authorized and operated under AMA/ECEA rules, I herewith consent to and authorized first aid and ambulance service as provided by the sponsoring club or property owners, and further to hold all parties harmless from any consequences of said aid.

**I HAVE READ THIS PARENTAL CONSENT, RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, UNDERSTAND THAT BY SIGNING IT I GIVE UP SUBSTANTIAL RIGHTS I AND/OR THE MINOR WOULD OTHERWISE HAVE TO RECOVER DAMAGES FOR LOSSES OCCASIONED BY THE RELEASEES' FAULT, AND SIGN IT VOLUNTARILY AND WITHOUT INDUCEMENT.**

**NOTICE for riders less than 18 years of age: In accordance with Pennsylvania and New Jersey laws, this application must bear the notarized signature of both parents or a guardian**

**Parents or Guardians Signatures**

(Both living parents and/or legal guardians must sign below.)

Sign \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_\_

Use ink only. I have read and understood this application and indemnity agreement. I hereby make oath and say that to the best of my knowledge and belief that all statements set forth in this document are true and correct.

Sign \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_\_

Use ink only. I have read and understood this application and indemnity agreement. I hereby make oath and say that to the best of my knowledge and belief that all statements set forth in this document are true and correct.

**Notary Public**

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Sign \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_\_

**Witness**

Sign \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_\_

**YOUTH ASSUMPTION OF RISK at ECEA Events – Minor is to Read and sign**

I have obtained my parent's consent to participate in the above event(s). I understand that I am assuming all of the risks if I get hurt during the event(s) and I state the following:

1. Both my parents and I believe I am qualified to participate in the event(s). I will inspect the premises and equipment and if, at any time, I feel anything to be unsafe, I will immediately leave and refuse to participate further in the event(s).
2. I understand that the ACTIVITIES OF THE EVENT ARE VERY DANGEROUS AND INVOLVE RISKS AND DANGERS OF MY BEING SERIOUSLY INJURED OR HURT, MY BEING PARALYZED OR KILLED.
3. I know that these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the event(s), the rules of the event(s), the condition and layout of the premises and equipment, or the negligence of others, including those persons responsible for conducting the event(s).

**I HAVE READ THE ABOVE ASSUMPTION OF RISK ACKNOWLEDGEMENT, UNDERSTAND WHAT I HAVE READ, AND SIGN IT VOLUNTARILY.**

YOUTH SIGN HERE \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_\_

**Witness:**

SIGN \_\_\_\_\_ Print \_\_\_\_\_ Date \_\_\_\_\_