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Motorcycle Safety Course Waiver & Indemnification

This form must be read in its entirety, and, where indicated, signed prior to your first class. Your instructor will collect it during the first session. If you are under 18 years of age, you must bring this form signed by your parent or guardian to the first day of class. If you fail to do so, you will not be allowed to participate.

Participation in this course requires physical stamina, motor coordination and mental alertness. The undersigned hereby attests they (1), have no known physical or mental limitations, and (2), have not used any form of alcohol, prescription or non-prescription drugs that could impair their performance in this course.

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

In consideration of *Des Moines Area Community College* and the *Motorcycle Safety Foundation*, including their members, employees, officers and/or agents (the "Safety Course Providers"), furnishing services, equipment, and/or curriculum to enable me to participate in the Motorcycle Safety Course, I agree as follows:

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 my participation in the Motorcycle Safety Course 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, other ailments that could cause serious disability, or death;
- (c) these risks and dangers may be caused by the negligence of the Motorcycle Safety Course Providers; the negligence of others, including other Safety Course participants; and may arise from foreseeable or unforeseeable causes; and,
- (d) by participating in these activities and/or using the equipment, **I, on behalf of myself, my personal representatives and my heirs, hereby assume all risks and all responsibility, and agree to release Safety Course Providers** for any injuries, losses and/or damage, including those caused solely or in part by the negligence of the Safety Course Providers, or any other person. If I have brought a motorcycle to use in the Safety Course, I also agree this release applies to any damage that occurs to it during the Safety Course and/or while being stored on DMACC's premises.

I agree and understand that, on behalf of myself, my personal representatives and my heirs, I am relinquishing any and all rights I now have or may have in the future to sue the Safety Course Providers for any and all injury, damage or death I may suffer arising from motorcycle riding or its equipment, including claims based on the Safety Course Providers' negligence.

II. READ CAREFULLY: THIS SECTION IS AN INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration of *Des Moines Area Community College* and the *Motorcycle Safety Foundation*, including their members, employees, officers and/or agents (the "Safety Course Providers"), furnishing services, equipment, and/or curriculum to enable me to participate in the Motorcycle Safety Course, I agree as follows:

I, on behalf of myself, my personal representatives and my heirs, agree to hold harmless, defend, and indemnify the Safety Course Providers 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 the Motorcycle Safety Course activities, including claims arising from the Safety Course Providers' or any other party's negligence.

I HAVE READ THIS RELEASE AGREEMENT AND BY SIGNING BELOW, I AGREE IT IS MY INTENTION TO ASSUME ALL RISKS AND RELEASE DES MOINES AREA COMMUNITY COLLEGE AND THE MOTORCYCLE SAFETY FOUNDATION FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

I HAVE READ THIS INDEMNIFICATION AND HOLD HARMLESS AGREEMENT AND BY SIGNING, I AGREE IT IS MY INTENTION TO ACCEPT LEGAL RESPONSIBILITY AND PAY FOR ANY LOSS FOR CLAIMS OR LAWSUITS AGAINST DES MOINES AREA COMMUNITY COLLEGE AND THE MOTORCYCLE SAFETY FOUNDATION ARISING FROM MY PARTICIPATION IN THE MOTORCYCLE SAFETY COURSE.

I have had the opportunity to ask any and all questions about (1), the waiver and release, and (2), the indemnification and hold harmless agreement above, and I understand their terms and meanings.

Participant Name | Please Print

Participant Signature

Date

Signature of parent or legal guardian if less than 18 years old

Relationship To Participant