

Release of Liability
Ride and Rally for a Cure

I, _____ (Print Name), on my own behalf an on behalf of my heirs, personal representatives, successors and assigns, for and in consideration of the opportunity to participate today in the Ride and Rally for a Cure being held today and Sponsored by the Andrea Lynn Cancer Fund and Zylstra Harley-Davidson and for other valuable consideration, the receipt and adequacy of which is hereby acknowledged, hereby releases and forever discharges Harley Davidson, Inc., its officer , directors, employees, agents and Zylstra Harley Davidson, its officers, directors, employees, agents and The Andrea Lynn Cancer Fund, its officers, directors, employees, agents("Released Parties")from any and all claims, demands, rights and causes of action of any kind whatsoever, whether known or unknown, which I now have or later may have against the Released Parties in any way resulting from, arising out of , or connected in any way to my participation in the Ride and Rally being held today and sponsored by The Andrea Lynn Cancer Fund and Zylstra Harley Davidson.

I acknowledge and agree that I have read and fully understand the above.____ (Please Initial).

This Release extends to any and all claims I now have or may have against the Released Parties, even if such claims result from strict liability or negligence on the part of any of all of the Released Parties, if it concerns the design, manufacture, repair or maintenance of the motorcycle(s) involved in the Ride and Rally for a Cure is conducted, or from any other cause. However, I am not releasing any released party from any intentional misconduct.

I acknowledge and agree that I have read and fully understand the above.____ (Please Initial).

I hereby state that I am a licensed motorcycle operator, that I am experienced in and familiar with the operation of various motorcycles, that I am familiar with the rules of the road, as applicable to motorcycle, and that I fully understand the risks and dangers inherent in motorcycling. I am voluntarily participating in the Ride and Rally for a Cure and I expressly agree to assume the entire risk of any accidents or personal injury, including death, which I might suffer or which I might cause as a result of my participation in the Ride and Rally for a Cure. I agree that I am participating in the ride knowing the existing weather conditions, the existing road conditions and the condition of the motorcycle I will be operating in the Ride and Rally for a Cure.

I acknowledge and agree that I have read and fully understand the above.____ (Please Initial) (Operator Only).

BY SIGNING TIS RELEASE, I HEREBY ACKNOWLEDGE AND AGREE THAT I HAVE FULLY READ THIS RELEASE AND FULLY UNDERSTAND IT, THAT I AM VOLUNTARILY GIVING UP CERTAIN LEGAL RIGHTS AND THAT I AM NOT RELYING ON ANY STATEMENTS OR REPRESENTATIONSOF ANY OTHER PERSON BEFORE SIGNINGTHIS RELEASE. I FURTHER AGREE THAT I AM SIGNING THIS RELEASE OF MY OWN FREE WILL AND NOT UNDER ANY DURESS.

_____ Operator Signature	_____ Passenger Signature
Print Name (clearly) – Operator _____ Date: _____	
Street Address: _____	
City: _____ State: _____ Zip: _____ Email: _____	
Phone Number: _____ Driver's License No: _____	

Print Name (clearly) – Passenger _____ Date: _____	
Street Address: _____	
City: _____ State: _____ Zip: _____ Email: _____	
Phone Number: _____ Driver's License No: _____ N/A _____	

Destination: Ride and Rally for a Cure Date of Ride: 7/26/2008