



www.adventureridertraining.com
386-852-4716

Registration Application:

- Full Name (as it appears on your Drivers License)

FIRST	MIDDLE	LAST
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Preferred Name: _____

- Address: _____ City: _____
State: _____ Zip: _____ - _____ County: _____
- Cell Phone: ____ - ____ - _____ Home OR Work Phone: ____ - ____ - _____ ext: ____
- Email: _____ .com (*For Adventure Rider Training Inc use only. Name and email address is **NOT** sold to any other entity*)
- Drivers License Number: _____ State: _____ I
attest that my Drivers License is currently valid: _____ (Initial here)
- Date of birth: _____ Gender: MALE FEMALE
- Have you ever ridden a motorcycle before? YES NO If yes, what kind? What experience? _____
- How did you hear of Adventure Rider Training, Inc (PLEASE BE AS SPECIFIC AS POSSIBLE)?

- Please advise which class date you are interested in attending: FIRST CHOICE _____
SECOND CHOICE: _____ (or if you do not have a particular choice, please leave blank and we will contact you to discuss available dates)

Please complete this registration and return to: *Adventure Rider Training, Inc., 4461 Daugharty Rd, Deland, FL 32724.* Along with the completed registration, please return a check or money order made payable to "**ADVENTURE RIDER TRAINING, INC**" in the amount of \$205.00 for the Basic Rider Course. (Returned checks are subject to the maximum fee allowable by law). Also, please return a photocopy of your Drivers License. **PLEASE NOTE** that we **CAN NOT** confirm a place in the class until receipt of the completed registration and payment. You will receive a confirmation email advising you of your class date once we receive the completed registration and payment. At that time we can email or fax you a class schedule and directions as needed. You may register and pay by credit card by calling 386-852-4716 or online at www.ride123.com.

If your chosen class is fully reserved when we receive the registration and payment, we will contact you to discuss alternate class dates. Please note that if you fail to show up for a class that you have been confirmed for or do not call within 48 hours of the beginning of your class date to notify Adventure Rider Training of a change in schedule, **there will be a \$150.00 reschedule fee for another class date.** Enrollment in a motorcycle training class is not a guarantee that you will successfully complete the class. There will be **no** refunds of the original registration fee issued.

(PLEASE READ AND SIGN THE ATTACHED WAIVER)

Do Not Write Below This Line _____

Mailed/Faxed: _____	Class Date: _____
Payment received: _____ Type: _____	Site: _____
Confirmation call: _____	Coach(es): _____
Completion Card Number: _____	

SAFETY COURSE -- GENERAL RELEASE, WAIVER & INDEMNIFICATION AGREEMENT rev. 01/22

In consideration for the Motorcycle Safety Foundation, Inc. ("MSF"), the entity sponsoring the training (Adventure Rider Training), the owner of the training motorcycle (if not owned by the undersigned), and the owners of the premises upon which training occurs, including each of their affiliates, subsidiaries, members, employees, officers, coaches, instructors, aides, and/or agents (collectively, the "Released Parties"), permitting the undersigned to participate in this Safety Education and Training Course (the "Course"), I, the undersigned Participant, agree to all of the following:

Participation in the Course requires physical stamina, motor coordination, and mental alertness. I hereby attest that I have no known physical or mental limitations and have not used any form of alcohol, or prescription or non-prescription drugs that could impair my performance in the Course. Participants under 18 years of age must have this form signed by a parent/guardian in person at the training location, or the parent/guardian may sign without appearing in person, in which case this form must be NOTARIZED.

I fully understand and acknowledge that (a) this Agreement is intended to be as broad and inclusive as permitted by the laws of the State in which the Course is conducted; (b) I have been advised of and agree to waive, on behalf of myself, my personal representatives and my heirs, all rights and benefits flowing from any state statute that would otherwise limit the scope of this Agreement or the undertakings and releases contained herein; (c) if any portion of this Agreement is held invalid or legally unenforceable, then the balance shall, notwithstanding, continue in full force and legal effect; and (d) I have had the opportunity to read this entire Agreement and ask any questions about it, and I fully understand its terms and meaning.

READ CAREFULLY: THIS IS A GENERAL RELEASE, WAIVER, ASSUMPTION OF RISK & COVENANT NOT TO SUE

I fully understand and agree that: (a) there are **DANGERS AND RISKS OF INJURY, DAMAGE, OR DEATH** that exist in my participation in the Course, and in my use of motorcycles and motorcycling equipment ("Motorcycling Activities"); (b) my participation in the Course and Motorcycling Activities may result in injury or illness including, but not limited to, **BODILY INJURY, DISEASE, STRAINS, FRACTURES, PARTIAL OR TOTAL PARALYSIS, OTHER AILMENTS THAT COULD CAUSE SERIOUS DISABILITY, AND DEATH**; (c) these risks and dangers may be caused by negligence of Released Parties, other Course participants, or others, and may arise from foreseeable or unforeseeable causes; and (d) by participating in the Course and Motorcycling Activities, I, **on behalf of myself, my personal representatives and my heirs, hereby knowingly and voluntarily assume all risks and all responsibility, and agree to release the Released Parties for any injuries, losses and/or damages**, including those caused solely or in part by negligence of the Released Parties or any other person. If I have brought a motorcycle or helmet to use in the Course, I also agree that this release applies to any damage that occurs to or from my motorcycle or helmet during the Course.

I fully understand and agree that, on behalf of myself, my personal representatives and my heirs, I hereby covenant not to sue, and am relinquishing any and all rights I now have or may have in the future to sue the Released Parties for any and all injury, damage, or death, whether known or unknown, that I may suffer arising from the Course or Motorcycling Activities, including claims based on the Released Parties' negligence.

I HAVE READ THIS AGREEMENT AND BY SIGNING BELOW I AGREE TO THE ABOVE TERMS, AND TO ASSUME ALL RISKS AND RELEASE THE ABOVE-NAMED RELEASED PARTIES FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

Participant Name (Printed) – First, Middle, Last _____ License or ID# and State _____ Participant Signature _____

Date – MM/DD/YYYY _____ Parent/Legal Guardian signature, if Participant under 18 yrs of age _____ Relationship _____ License or ID# and State _____

READ CAREFULLY: THIS IS AN INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

I, on behalf of myself, my personal representatives and my heirs, agree to hold harmless, defend, and indemnify the Released Parties from any and all claims, suits, or causes of action by any third parties, including Released Parties or other Course participants, for bodily injury, property damage, or other damages that may arise out of my participation in the Course or Motorcycle Activities, including claims arising from the negligence of Released Parties, other Course participants, or any other party.

I HAVE READ THIS AGREEMENT AND BY SIGNING BELOW I AGREE TO THE ABOVE TERMS, AND TO ACCEPT LEGAL RESPONSIBILITY AND PAY FOR ANY LOSS FOR CLAIMS OR LAWSUITS AGAINST THE ABOVE-NAMED RELEASED PARTIES ARISING FROM MY PARTICIPATION IN THE COURSE.

Participant Name (Printed) – First, Middle, Last _____ License or ID# and State _____ Participant Signature _____

Date – MM/DD/YYYY _____ Parent/Legal Guardian signature, if Participant under 18 yrs of age _____ Relationship _____ License or ID# and State _____