

# Motorcycle Advanced Riding Skills M2 to M Training Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement

BY SIGNING THIS DOCUMENT, YOU WILL GIVE UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE, CLAIM DAMAGES AND SEEK COMPENSATION FOR ANY INJURIES YOU MAY SUSTAIN.

- I understand that the signing of this document is a required component of the Course. I acknowledge that I am signing this document and I am agreeing to be bound to the terms within it, as good and valuable consideration in exchange for the MTOhp permitting me to participate in the Course.

# **Assumption of Risk**

- I understand and acknowledge that riding a motorcycle/learning to ride a motorcycle is an inherently dangerous activity. I also am aware that riding or learning to ride a motorcycle and participating in the Course involves many risks, dangers and hazards including the risk of sustaining personal injury. Such injuries include but are not limited to muscular injuries, soft tissue injuries, broken bones, bruises, scrapes, cuts, sprains, dislocation, head injuries, facial eye and/or dental injuries, other severe injuries such as paralysis or death. By signing this document I am voluntarily accepting the risks identified above and assuming all responsibility for any and all injuries, including death that I may sustain during, because of, arising out of, in connection with or in relation to my participation in the Course.
- I understand and acknowledge that the motorcycle training area contains many obstacles including but not limited to buildings, concrete barriers, light stands, asphalt imperfections, debris, trees, training aids, other motorcycles or motorized vehicles, pedestrians, other students on foot or on other motorcycles and course instructors and that all obstacles in the motorcycle training area pose a risk of serious personal injury or death. By signing this document I am voluntarily accepting the risk that I may sustain injuries, including serious injuries or even death because of obstacles or hazards which exist in the motorcycle training area and that I am assuming all responsibility for any and all injuries, including death that I may sustain during, because of, arising out of, in connection with or in relation to my participation in the Course.
- I understand and acknowledge that in addition to the conditions of the motorcycle training area, I
  am at risk for serious injury or death due to my inexperience and inability to operate a motorcycle,
  the inexperience and inability of other students to operate a motorcycle, the malfunctioning or
  misuse of any motorcycle operated by myself or other course participants, and the failure of the
  MTOhp to safeguard me from the risk, hazards and dangers associated with learning to ride a

motorcycle including but not limited to the negligence or other failure on the part of the MTOhp to train and instruct me in the operation of a motorcycle. I understand and acknowledge that as a result of my participation in the Course, I may cause injury to others and that I may damage property owned by others. By signing this document I am voluntarily accepting the risks identified above and assuming all responsibility for any and all injuries, including death that I may sustain during, because of, arising out of, in connection with or in relation to my participation in the Course.

 For greater certainty and so as to avoid any uncertainty, I understand the risks associated with my participation in the Course and I fully accept all risks including the usual risks one would associate with riding and learning to ride a motorcycle AS WELL AS THE RISK THAT THE MTOhp MAY BE NEGLIGENT, OR OTHERWISE FAIL TO PROVIDE A SAFE LEARNING ENVIRONMENT WHEN SUCH NEGLIGENCE OR FAILURE COULD LEAD TO INJURY OR DEATH.

#### **Disclaimer and Release and Waiver of Claims**

- By signing this document I hereby release the MTOhp from any and all responsibility and from any liability for:
- any losses, injuries, death or damages that I may sustain:
- any lost income, expenses or costs I may incur, and;
- any injuries, death or damage that I may cause to others

during, because of, arising out of or in relation to my participation in the Course, however such losses, injuries, death damages, expenses or costs may have been caused, even if such losses, injuries, damages, expenses or costs may have been caused or were caused by the negligence of the MTOhp.

- For greater certainty I understand and agree that by signing this document, I WILL BE GIVING UP MY LEGAL RIGHT TO SUE THE MTOhp IN THE EVENT THAT I SUSTAIN ANY LOSSES, INJURIES, DEATH, OR DAMAGES because of, arising out of or in relation to my participation in the Course. I understand that this document is a RELEASE OF MY RIGHT TO SUE the MTOhp and that this document may be used against me in a court of law should I sue the MTOhp. I further understand that the term "Right to Sue" means the right to make a claim, bring a lawsuit or otherwise advance any action against the MTOhp for any losses, injuries, death or damages that I may sustain and for any expenses or costs I may incur during, because of, arising out of or in relation to my participation in the Course.
- I also understand and acknowledge that the waiver and release of my legal right to sue the MTOhp
  as set out in paragraph 7, encompasses any rights I may have for contribution and indemnity from
  the MTOhp, including but not limited to the right to add the MTOhp to any claim or lawsuit in the
  event that I am sued for any matter because of, arising out of, in connection with or in relation to
  my participation in the Course.
- I expressly acknowledge that the waiver of my legal rights as set out in paragraph 7 above extends both to losses, injuries, death, damages, costs and expenses which result from the usual risks one would associate with riding and learning to ride a motorcycle AND TO losses, injuries, damages, cost and expenses WHICH MAY RESULT FROM THE NEGLIGENCE OF THE MTOhp AND FROM ANY FAILURE ON THE PART OF THE MTOhp TO TAKE CAREFUL MEASURES AVAILABLE OR UNDERSTOOD TO BE NECESSARY FOR SAFETY IN THE CIRCUMSTANCES.
- For greater certainty and so as to avoid any uncertainty, I understand that by signing this
  document I AM GIVING UP MY RIGHT TO SUE THE MTOhp, REGION OF PEEL and the
  CANADA SAFETY COUNCIL for any losses, injuries, death, damages, cost or expenses, due to
  any cause whatsoever, EVEN if such losses, damages, injuries, costs or expenses were caused

BY THE NEGLIGENCE OF THE MTOhp OR BY THE FAILURE OF THE MTOhp TO TAKE CAREFUL MEASURES AVAILABLE OR UNDERSTOOD TO BE NECESSARY FOR SAFETY IN THE CIRCUMSTANCES.

### **Hold Harmless and Indemnity**

• In addition to my assumption of the risks associated with riding or learning to ride a motorcycle, and in addition to waiving my legal right to sue the MTOhp as per paragraphs 7 through 11, I also hereby agree to indemnify and hold harmless the MTOhp against and from all claims, demands, actions, causes of action, suits, debts, liabilities, demands, judgments and damages whatsoever, which may be brought against or sought from the MTOhp because of, arising out of, in connection with or in relation to my participation in the Course.

## **Additional Agreements**

• This document and this agreement and the commitments I have made in the document, shall be effective and binding upon my heirs, next of kin, successors, assigns, executors, administrator and/or legal representatives in the event of my death or incapacity.

#### I acknowledge that:

- I am at least 18 years of age; or if I am not, my parent or guardian must co-sign the paragraphs requiring initials and sign the Declaration of Guardianship of a Minor Child.
- I have read this document in its entirety and appreciate my rights, obligation and liabilities set out herein;
- I have been given the opportunity to seek independent legal advice with respect to this document and that I have received such advice or waived my right to do so;
- I am voluntarily participating in this course and voluntarily signing this document.

I understand that if I do not sign this document in full, I will not be permitted to participate in this Course and that I will be entitled to a full refund of my Course fees.

Date:	<del>-</del>		
Student Name:	(an executable copy will be	e provided in class)	_
(please print) Student Signature:	_(an executable copy will be	provided in class)	_
_	ION OF GUARDIANSH or participants 16 and 1	HIP OF A MINOR CHILD  7 years of age)	
I, (Printed Name of Parent/Gua	ardian) (an execu	utable copy will be provided in class)	
HEREBY DO CERTIFY THAT (Student Name)		R LEGAL GUARDIAN OF: will be provided in class)	AND I
hereby give consent for my so	n/daughter (Student Na	ame) participate as a student in the Ca	— mada
Safety Council Motorcycle Trai CONDITIONS STATED IN TH	ining Program offered b	by MTOhp, SUBJECT TO ALL T	HE
(an executable copy will b Signature of Parent/Guardian	e provided in class)	 Date	
-			
Omit middle block of dig		- <u>XXXXX</u>	
Alternate I.D. :			_

Student Number

# **Motorcycle Training Organization of Halton-Peel Student Information & M2X Eligibility Statement**

## **Eligibility Statement**

I hereby acknowledge that:

- **1.** I am eligible for this M2 Exit Course and examination towards my M licence class by virtue of the fact that I have held an M2 licence class designation for not less than 22 months, or not less than 18 months if I received my M2 licence class designation with a Recognized Authority, and
- **2.** my M2 licence class designation is valid and will be for the duration of this M2 Exit Course, and
- **3.** the following information is accurate and true as attested to by my signature below.

Student Name:(an executable copy will be provided in class)				
Student Address:				
	Province:Postal Code:			
Phone Home:	Mobile:			
Email:				
Emergency Contact Name:				
Emergency Contact Phone:	Relationship:			
Medical Concerns/History (please concerns below in writing and spe	e identify any allergies, heart condition or other physical eak to your instructor)			
	MTOhp course offering related emails to be sent to you Current Class:			
Motorcycle Year, Make & Model_				
Licence Plate:	Validation sticker expiry date:			
Insurance Carrier Name:				
Policy Number:				
In Witness Whereof I have hereur	nto set my hand thisday of, 20_			
Student Signature:(an o	executable copy will be provided in class)			
Instructor Name:	Instructor Signature			

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