

NORTHERN MICHIGAN UNIVERSITY
MOTORCYCLE SAFETY EDUCATION PROGRAM

WAIVER OF LIABILITY
PLEASE PRINT, COMPLETE, SIGN, AND BRING TO CLASS

In consideration of NORTHERN MICHIGAN UNIVERSITY; furnishing services and/or equipment to enable me to participate in the Motorcycle Rider Education Class, I agree as follows: I fully understand and acknowledge that: (a) risks and dangers exist in my use of motorcycles and motorcycle equipment and my participation in the Motorcycle Rider Education Class 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, death or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employees, officers and agents of NORTHERN MICHIGAN UNIVERSITY; the negligence of the participants, the negligence of others, accidents, breaches of contract, the forces of nature or other causes. These risks and dangers may arise from foreseeable or unforeseeable causes; and (d) by my participation in these activities and/or use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, or employees of NORTHERN MICHIGAN UNIVERSITY; or by any other person. **Initial** _____

I, on behalf of myself, my personal representatives and my heirs hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify NORTHERN MICHIGAN UNIVERSITY; and its owners, agents, officers, and employees from any and all claims, suits or causes of action for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of motorcycles and motorcycle equipment or my participation in the Motorcycle Rider Education Class activities. I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by NORTHERN MICHIGAN UNIVERSITY and its owners, agents, officers, or employees. **Initial** _____

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE IT IS MY INTENTION TO EXEMPT AND RELIEVE NORTHERN MICHIGAN UNIVERSITY; FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

_____ Date of Birth _____ Age: _____
PRINT NAME (mm/dd/yy)

SIGNATURE (Rider's) Date

SIGNATURE OF PARENT OR GUARDIAN If Rider is less than 18 years old Date

Name on License: _____ Driver's License # _____

Address: _____

City _____ State _____ ZIP _____

Phone: _____ Email name _____

OPTIONAL - Medical Insurance _____ G/N: _____ P/N: _____
Group Number Policy Number

Name of Policy Holder: _____ Emergency Phone _____

PLEASE PRINT, COMPLETE, SIGN, AND BRING TO CLASS
ANYONE WITHOUT THIS FORM, WILL NOT BE ADMITTED

For RiderCoach Use Only:

Completion Certification Number: _____	Written Test: _____	Riding Test _____
Continuing Education – Northern Michigan University 1401 Presque Isle Avenue Marquette, MI 49855 906-227-2103		