

GRAND TOUR

April 1 - September 30, 2017

Questions?
 Contact John (503) 351-1650
 Char at (503) 706-3969
 Dale (503) 775-1864
 Email: info@rose-city-mc.org
 Web: http://www.rose-city-mc.org.

Mail Entry with Check or Money Order To:
Rose City/Grand Tour
P.O. Box 91339, Portland, OR 97291-1339

Please Copy As Needed

\$3000 per person

(DETACH HERE)

\$3000 per person

Grand Tour

Please Print

Rider Name: _____ Phone: (____) _____
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Birthdate: ____/____/____ AMA#: _____ Email: _____
 Motorcycle Make: _____ Year: _____ CC's: _____
 Club Association/Affiliation (If Any): _____ Sidecar/Trike(Circle)
 Passenger Name: _____ Phone: (____) _____
 Birthdate: ____/____/____ AMA#: _____ Club Association/Affiliation (If Any): _____

Please Read Carefully Before Signing

RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT

In consideration of the acceptance of my entry in this event. I do for myself, my heirs, executors, administrators, and assigns, hereby give up, RELEASE, and forever DISCHARGE in advance my rights to sue or make any claim for damages due to negligence or carelessness the American Motorcyclist Association; Rose City Motorcycle Club and its Officers, Directors, members, and agents; other promoters, sponsors, and their employees; and all other organizations and their employees conducting or connected with this Rose City Motorcycle Club event for injury to person or property that I may suffer, including crippling injury or death, while participating in the event and while on event premises.

I AM AWARE THAT MOTORCYCLING CARRIES A SIGNIFICANT RISK OF SERIOUS PERSONAL INJURY, DEATH, AND PROPERTY DAMAGE. I know the risks of danger to myself, my minor child (if present), and my property while participating in the event and while on event premises and, relying upon my own judgement and ability. I ASSUME ALL SUCH RISK OF LOSS and hereby agree to reimburse all costs to, and forever HOLD HARMLESS and INDEMNIFY, all persons and entities identified above, generally and specifically, from any and all liability for death and/or personal injury or property damage resulting in any way from my participation in this event.

Signature: _____ Date: _____
 Passenger Signature: _____ Date: _____

If Minor Child Will Be Participating Please Read Carefully Before Signing

PARENTAL/LEGAL GUARDIAN MINOR RELEASE

No entrant under the age of majority (18 years) may participate in the Rose City Grand Tour without the written, NOTARIZED signature consent of parent and/or legal guardian. Rose City Motorcycle Club (RCMC) shall retain written consent of parent and/or legal guardian.

Under penalty of perjury, I swear, depose, and state that I am the parent and/or legal guardian of the named minor.
THIS IS A RELEASE

Parent/Legal Guardian Signature: _____

Subscribed and sworn to by the affiant above, named this _____ day of _____, 2017.

Notary Signature: _____ Date: _____

Notary Public for the State of _____, County of _____

My Commission Expires: _____