OHIO DEPARTMENT OF PUBLIC SAFETY



MOTORCYCLE SAFETY COURSE WAIVER & INDEMNIFICATION

(0) H310/		INDL	_1411.411_1	CAI	ION			
1-800-83-Rider								
NAME (FIRST)	MIDDLE INITIAL	LAST			E-MAIL			
ADDRESS		CITY				STATE	ZIP CODE	COUNTY
						D. 25. 05. 0		105
DRIVER LICENSE / TEMP # PRIMARY PHONE			GENDER			DATE OF BIRTH		AGE
			Male Female					
Participation in this course requires physical stamina, motor coordination, and mental alertness. The undersigned hereby attests that he / she has no known								
physical or mental limitations and has not used any form of alcohol, prescription or non-prescription drugs that could impair his / her performance in this course. Participants under 18 years of age must have this form signed by a parent or guardian.								
I. READ CAREFULLY: THIS SECTION IS A LEGAL RELEASE, ASSUMPTION OF RISK, WAIVER AND COVENANT NOT TO SUE AGREEMENT								
In consideration of Ohio Department of Public Safety, including their members, employees, officers and / or agents (the "Safety Course Providers"),								
furnishing services, equipment, and / or curriculum to enable me to participate in the Motorcycle Safety Course,								
l agree as follows:								
I fully understand and acknowledge that: (a) there are DANGERS AND RISK OF INJURY, DAMAGE , OR DEATH that exist in my use of motorcycles and motorcycle equipment and my participation in the Motorcycle Safety Course 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, OTHER AILMENTS THAT COULD CAUSE SERIOUS DISABILITY, OR DEATH; (c) these risks and dangers may be caused by								
my negligence; the negligence of the Safety Course Providers; the negligence of others, including other Safety Course participants; and may arise from foreseeable or unforeseeable causes; and (d) by participating in these activities and / or using the equipment, I, on behalf of myself, my personal								
representatives and my heirs, hereby assume all risks and all responsibility, and agree to release the Safety Course Providers for any								
injuries, losses and / or damages, including those caused solely or in part by the negligence of the Safety Course Providers, or any other person								
including myself, as well as any costs, judgments or settlements which may be brought or entered against them as a result of my participation in these								
activities and / or using the equipment. If I have brought a motorcycle to use in the Safety Course, I also agree that this release applies to any damage that occurs to it during the Safety Course.								
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I agree and understand that, on behalf of myself, my personal representatives and my heirs, I am relinquishing any and all rights I now have or may have in the future to sue the Safety Course Providers for any and all injury, damage, or death I may suffer arising from motorcycle riding or its								
equipment, including claims based on my negligence, others' negligence, or the Safety Course Providers' negligence.								
In consideration of Ohio Department of Public Safety, including their members, employees, officers and / or agents (the "Safety Course Providers"), furnishing services, equipment, and / or curriculum to enable me to participate in the Motorcycle Safety Course, I agree as follows: I, on behalf of myself, my personal representatives and my heirs, agree to hold harmless, defend, and indemnify the Safety Course Providers from any and all claims, suits, or causes of action by others for bodily injury, property damage, or other damages which may arise out of my use of motorcycles and motorcycle equipment or my participation in the Motorcycle Safety Course activities, including claims arising from the Safety Course Providers' or any other party's negligence. I HAVE READ THIS RELEASE AGREEMENT AND INDEMNIFICATION AND HOLD HARMLESS AGREEMENT AND BY SIGNING I AGREE IT IS MY INTENTION TO ACCEPT LEGAL RESPONSIBILITY AND PAY FOR ANY LOSS FOR CLAIMS OR LAWSUITS AGAINST SAFETY COURSE PROVIDERS ARISING FROM MY PARTICIPATION IN THE MOTORCYCLE SAFETY COURSE. I have had the opportunity to ask any questions about the indemnification and hold harmless section and I understand its terms and meaning. The release and waiver section must be signed and witnessed by instructor on the first day of class. If you are a minor, parent or legal guardian signature required below. PARTICIPANT NAME (PLEASE PRINT) WITNESSING INSTRUCTOR SIGNATURE X WITNESSING INSTRUCTOR NAME (PLEASE PRINT) WITNESSING INSTRUCTOR SIGNATURE X WITNESSING INSTRUCTOR SIGNATURE X								
PARENT OR LEGAL GUARDIAN SIGNA		J			ATIONSHIP		1	<u> </u>
X							☐ Checked Parent / Guardian ID	
OR – this section must be signed by a parent or legal guardian, the student, and notarized prior to class.								
State of Ohio								
County of	,SS:			_				
The foregoing instrument was acknowled	ged before me this			da	ay of		,20	, by.
X student PARENT OR LEGAL GUARDIAN								
My commission expires	20	1	X	7				

NOTARY PUBLIC