



CLEARWATER L.O.H.®
WARRIOR PRINCESS RIDE
9 March '19
Registration and Indemnity:



SURNAME: (RIDER) _____ (PILLION/PARTNER) _____

FIRST NAME:(RIDER) _____ (PILLION/PARTNER) _____

H.O.G NUMBER:(RIDER) _____ (PILLION/PARTNER) _____

E-MAIL ADDRESS:(RIDER) _____ (PILLION/PARTNER) _____

MOBILE NUMBER:(RIDER) _____ (PILLION/PARTNER) _____

MEDICAL AID:(RIDER) _____ (PILLION/PARTNER) _____

MEDICAL AID NO:(RIDER) _____ (PILLION/PARTNER) _____

ALLERGIES:(RIDER) _____ (PILLION/PARTNER) _____

NEXT OF KIN:(RIDER) _____ (PILLION/PARTNER) _____

NEXT OF KIN CONT. NO: (RIDER) _____ (PILLION/PARTNER) _____

R280.00 REGISTRATION FEE INCLUDES THE FOLLOWING: • Lunch, Patch and Gift Pack*

PLEASE NOTE: ONCE PAYMENT IS MADE NO REFUNDS WILL BE CONSIDERED AND SHOULD YOU NOT BE ABLE TO ATTEND YOU WILL NEED TO DISPOSE OF YOUR TICKET.

BANKING DETAILS: ACCOUNT NAME: H.O.G.® Clearwater BANK: Standard Bank ACCOUNT NO: 402 320 115 BRANCH CODE: 001 206

REFERENCE YOUR PAYMENT: (WPR19 and Your Name). AMOUNT TRANSFERRED: R _____ PLEASE ATTACH PROOF OF PAYMENT TO THIS REGISTRATION FORM AND MAIL TO: hog@clearwaterhd.co.za SUBJECT: WPR19 and "Your Name"

H.O.G.® CLEARWATER WARRIOR PRINCESS RIDE MARCH 2019 RELEASE/INDEMNITY

INTRODUCTION: The purpose of this document is to indemnify Harley-Davidson, Inc., Harley- Davidson Motor Company, Harley-Davidson Europe Ltd or any of its corporate affiliates, the Harley Owners Group (H.O.G.®), authorized Harley-Davidson dealer(s) and or local H.O.G.®R. chartered chapter(s) and their respective officers, directors, employees, marshals and agents (hereinafter referred to as "RELEASED PARTIES"), for any claim based upon negligence against the Clearwater Chapter or any of the above associates arising from any motorcycle based events connected to the above parties.

ACKNOWLEDGEMENT: In signing this indemnity, the signatory agrees that they understand the nature of motorcycling activities and the risks inherent therein, and the indemnity is signed in the knowledge that these activities involve risks and dangers of serious injury including permanent disability, paralysis and death. The signatory also acknowledges that cover in terms of the Road Accident Fund is at best delayed and in certain instances, particularly for the passenger of a motorcycle, severely limited and often inadequate.

INDEMNITY: The signatories, by signature hereof, indemnifies and holds harmless Released Parties, against all claims by the signatory, the signatory's estate and / or dependants, for death, personal injury or property damage resulting from the negligence of Released Parties.

MINOR CHILDREN AND DEPENDANTS: Where applicable, the signatory also signs on behalf of their minor children and dependants, acknowledging that in doing so they waive any claim on behalf of the minor or dependant in respect of the above dangers that could well be severe and permanent.

AUTHORISATION TO TAKE PHOTOGRAPHS: I understand that the RELEASED PARTIES may take photographs of participants at the EVENT(S) for use in H.O.G.® related materials. I hereby confirm that I have no objection that my photograph is taken and used in this context and for this purpose. I understand my image may be captured and used in all media form by the Chapter and their assigns; this release is irrevocable, worldwide and perpetual. By signing this Release and Authorization to Photograph, I certify that I have read this Release and fully understand it and that I am not relying on any statements or representations made by the RELEASED PARTIES.

I hereby consent to communications with me via email, SMS, WhatsApp and other social media platforms with regards to H.O.G.® Clearwater Chapter events and activities.

CERTIFICATION: By signing this indemnity and authorization I certify that I have read this indemnity and authorization and fully understand it, that I give up substantial rights that myself or the minor / dependant would otherwise have had to recover damages for losses occasioned by the Released Parties' fault, and sign it voluntary and without relying upon any representations or statements by the Released Parties or any other person.

NAME: _____ PILLION/PARTNER: _____

SIGNATURE: _____ SIGNATURE: _____

DATE: _____ DATE: _____