



OPEN ROAD RIDERZ
Membership Form
(PLEASE PRINT CLEARLY)

Member Name _____
 Address _____
 City _____ State _____ Zip _____
 E-mail _____
 Phone _____ DOB _____
 Emergency Contact _____
 Phone _____ Relationship _____
 Medical Conditions _____

Enter in Open Road Riderz Database? Yes [] No []

-THIS IS A RELEASE, READ BEFORE SIGNING-

I agree that the Sponsors, officers, directors, employees and agents of Open Road Riderz (hereinafter, the **“RELEASED PARTIES”**) shall not be liable or responsible for injury to me (including paralysis or death) or damage to my property occurring during any Open Road Riderz activities and resulting from acts or omissions occurring during the performance of the duties of the Released Parties, even where the damage or injury is caused by negligence. I understand and agree that all Open Road Riderz members and their guests participate voluntarily and at their own risk in all Open Road Riderz activities and I assume all risks of injury and damage arising out of the conduct of such activities. I release and hold the **“Released Parties”** harmless from any injury or loss to my person or property which may result from my participation in Open Road Riderz activities and event(s). I UNDERSTAND THAT THIS MEANS THAT I AGREE NOT TO SUE THE **“RELEASED PARTIES”** FOR ANY INJURY OR RESULTING DAMAGE TO MYSELF OR MY PROPERTY ARISING FROM, OR IN CONNECTION WITH, THE PERFORMANCE OF THEIR DUTIES IN SPONSORING, PLANNING, OR CONDUCTING SAID EVENT(S).

Member Signature _____ Date ____ / ____ / ____
 Dues Paid \$ _____ Date ____ / ____ / ____ Membership# _____

Return along with membership dues to:
Open Road Riderz
4321 North Hwy 16, Denver, NC 28037