BREAST CANCER ACTION KINGSTON'S 3rd
SHARE THE CARE MOTORCYCLE RIDE
SATURDAY OCTOBER 01, 2011

Name _____ Address _____
City _____ Postal Code _____ Phone _____
Email _____
Have you participated in any organized Ride before? Yes ☐ No ☐ Which one _____
Are you a Rider ☐ Passenger ☐ Collected Pledges only ☐
Do you belong to a motorcycle club/association? Yes ☐ No ☐ Which one _____
☐ YES I have a valid motorcycle driver's license, approved helmet, and insurance required to participate.

WAIVER:

I understand and am aware that there are dangers and risks involved in riding a motorcycle and in riding a motorcycle in a group such as the Share the Care Motorcycle Ride. These dangers and risks include damage, injury, serious injury and/or death. Knowing and appreciating fully these dangers and risks, I the undersigned, hereby waive, release and forever discharge the Share the Care Motorcycle Ride, the proceed recipient Breast Cancer Action Kingston, and its officer, directors, and/or employees, Motosport Plus, members of the organizing committee, sponsors, supporters, volunteers and all other associates with the event of and from all manner of actions, causes of action, suits, debts, claims and demands whatsoever arising from or in connection with the Share the Care Motorcycle Ride and associated events. By signing, I certify that I have read and fully understand this waiver. I assume full responsibility for injury or damage arising as a result of the participation association with the Share the Care Motorcycle Ride event and for my passengers. This waiver also includes a "model release" for photographs taken and audio/video recordings made while participating in the above activities.

SIGNED _____ DATE _____

- Breast Cancer Action Kingston (BCAK) respects your privacy. We do not rent, sell or trade our mailing lists.
- If you collect $50 or more in pledges, your Ride registration ($20) will be free and you will receive a free Share the Care t-shirt!
- Please make cheque payable to: Breast Cancer Action Kingston or donate online at www.bcakingston.org or pay by VISA.

All pledges must be collected and submitted before the Ride begins. Receipts will be issued for donations of $10.00 or more, provided name and address are complete and LEGIBLE.

Name	Address	Postal Code	Amount

	Total Pledges	
Registration is $20.00 or FREE with $50.00 or more in pledges and receive a FREE Share the Care T-shirt	**Registration**	
	TOTAL	

BCAK Official as Witness _____