



**Bay Area V-Twins, Inc.**  
**Membership Form and Waiver/Release**  
**--THIS IS A RELEASE, READ BEFORE SIGNING--**

In signing this document, I represent that I am fully knowledgeable of the danger and hazards associated with riding motorcycles. I certify that I am duly licensed and competent to operate a motorcycle in a safe manner and the vehicle is in a safe operating condition. I will be riding on public highways and am solely responsible to determine the speed and operational characteristics of my motorcycle while participating with Bay Area V-Twins, Inc. or Bay Area V-Twins Charities, Inc. (the "Club"). I carry motorcycle liability insurance as required by law.

I agree that the Club and their respective officers, directors and/or agents (hereinafter, the "**RELEASED PARTIES**"), shall not be liable or responsible for injury to me or damage to my property occurring during any club 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 (except willful neglect) I understand and agree that all members and their guests participate voluntarily and at their own risk in all activities and I assume all risks of injury and damage arising out 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 the Club, scheduled or unscheduled 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 CLUB DUTIES IN SPONSORING, PLANNING OR CONDUCTING SAID EVENT(S).

I certify that I have no known physical or mental impairment that may affect my safety or the safety of the group. I understand that the choice of wearing a helmet or other protective gear is solely my own and that I am responsible for my compliance with all state laws, including those regarding helmets. I certify that I am not under the influence of any narcotic, alcohol or other drug that may impair my understanding or judgment.

***Dues are \$25.00 yearly; however feel free to donate any amount you care to during the year.***  
***The good things we do come from our donations.***

Member \_\_\_\_\_  
(Sign and print name) (Date)

Send Dues and this completed application to:

BAVT  
1601 Dickinson Ave. Suite B  
Dickinson, Texas 77539

Revised 07/21/2009