

3rd Annual “HERITAGE RIDE” Registration Form

I acknowledge and accept the risks, dangers and hazards associated with the “Heritage Ride” which may include without limitation, road conditions, weather conditions, mechanical failure, my failure to drive safely or within the limits of my own ability, and the negligence of other motorcycle or motor vehicle drivers.

On behalf of myself, my heirs, next of kin, executors, administrators, successors, assignees, and representatives, I hereby release the Iuka Heritage Committee, Inc., and the City of Iuka, its officers, directors, volunteers, and employees, and all subsidiaries, affiliates, agents, successors and agents (collectively, the “Released Parties”) from any and all liability, claims, demands, and causes of action whatsoever, arising out of my participation in this event and all it’s related activities.

I confirm that I am at least the age of 18 years and that I have read and understood this agreement, I am waiving certain legal rights which I or my heirs, next of kin, executors, administrators, successors, assignees, and representatives may have against the released parties.

This release agreement shall be as broad and inclusive as is permitted by the State in which the event is conducted. If any portion of it is held invalid, the balance shall continue in full force and effect.

I have read, understand and agree to the terms of this Agreement.

Signature

Date

NAME _____

ADDRESS _____

CITY _____ ST _____ Zip _____

PHONE NUMBER _____

EMERGENCY CONTACT _____ PHONE # _____

Registration Fee: \$10.00..... \$ _____

Total Amount Enclosed..... \$ _____

PROCEEDS TO BE DONATED TO



Shriners Hospitals
for Children™

Return Form with Registration Fee to:

Iuka Heritage Committee, Inc. (IHC)

P.O. Box 953

Iuka, Mississippi 38852

Attention: Gail Hudson, Coordinator