

PLEASE COMPLETE:

Email: \_\_\_\_\_

Cell no: \_\_\_\_\_

## PHILADELPHIA FUN RIDE – 16 September 2017

# Quad Bike / 2 Wheeler/ Side by Side

WHEREAS, I \_\_\_\_\_ (full name)

An adult together with my wife and children or other passengers

Will willingly be participating in the **Philadelphia fun ride Outride Event** (hereafter referred to as the **Philadelphia fun ride Outride Event meeting / outing**), I acknowledge that in participating in these activities I shall be subjecting myself, passengers and my vehicle to danger and the possibility of personal injury, loss of support and / or the loss of my life or passengers lives, and / or the loss or damage to personal possessions.

THEREFORE, I \_\_\_\_\_ (full name)  
**in my personal capacity as well as natural guardian of my minor children**

do hereby acknowledge that I have freely and voluntarily accepted fully the risk, to myself and my minor dependents and do hereby on behalf of myself, my heirs, executors, administrators or assigns or assigns forever discharge, release and indemnify, hold harmless and absolve the organisers of the **Philadelphia fun ride Outride Event**, their committee, land owners and any other person involved in the above activities even where such activities constitute a negligent act or omission on the part of the **Philadelphia fun ride Outride Event** from any claim or claims of whatsoever nature prior to and including the date/s of the activities and particularly as a result of any activity of whatsoever nature in which the Fun Day is in any way party to **I acknowledge the Rules of the Philadelphia fun ride Outride Event day.**

And I do further indemnify the Fun Day against any claim or claims, which may be brought against them by any other person or body arising out of my actions aforementioned, and In particular against claims made against the Fun Day for any claim or claims preferred against them by my dependents

I acknowledge that I have given indemnity form to each of my passengers and that they have accepted and agreed to the conditions as set out above.

IN WITNESS WHEREOF I have hereunto set my hand at Philadelphia on this 16th of September 2017 in the presence of the undersigned witnesses:

**Name Children under 18 in your care who you are responsible for :**

\_\_\_\_\_

**Passenger's names:** \_\_\_\_\_

**Signature :** \_\_\_\_\_

**ID No:** \_\_\_\_\_

As witnesses:

1. \_\_\_\_\_

2. \_\_\_\_\_