

RELEASE OF LIABILITY

I, [PARTICIPANT NAME] at [PARTICIPANT ADDRESS] hereby assume all of the risks of participating in any/all activities being conducted by Vespa Sb at 6418 Camino Viviente Goleta CA, 93117, including, but not limited to, any risks arising from negligence or carelessness on the part of the persons or entities being released, from dangerous or faulty equipment or property owned, maintained, or controlled by them, or from their potential liability without fault.

I certify that I am physically healthy, that I have adequately prepared or trained for participation in this activity, and that I have not been told by a competent medical expert not to participate. I confirm that there are no medical reasons or difficulties that prevent me from participating in this activity.

I understand that the terms of this Release of Liability Form will govern my conduct and duties during said Activity.

In consideration of your acceptance of my application and permission to engage in this activity, I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors, and assign as follows:

1. I waive, release, and discharge Vespa SB and/or their directors, officers, employees, volunteers, representatives, and agents, as well as the activity host, from any and all liability, including but not limited to liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind that may subsequently occur to me, including my travel to and from this activity.
2. Indemnify, hold harmless, and agree not to sue the entities or people mentioned in this paragraph for any and all liabilities or claims arising from participation in this activity, whether caused by the release's carelessness or otherwise.

I understand that Vespa SB and their directors, officers, volunteers, representatives, and agents will not be held liable for the errors, omissions, actions, or failures to act by any party or entity conducting a specified activity on their behalf.

I understand that this activity may include a test of a person's physical and mental limits, as well as the risk of death, serious injury, and property damage. The dangers include, but are not limited to, those caused by terrain, facilities, temperature, weather, participant condition, equipment, motor traffic, lack of hydration, and the acts of others, including, but not limited to, participants, volunteers, monitors, and/or activity producers. These dangers are not only there for participants, but also for any volunteers.

I hereby consent to any medical care that may be judged necessary in the case of an injury, accident, or sickness while participating in this activity.

The Release of Liability Form should be interpreted broadly to give a release and waiver to the greatest extent permitted by applicable law.

I have read, understood, and fully acknowledge the contents of this Release of Liability.

RELEASEE

PARTICIPANT

Signed (signature)

Signed (signature)

Print Name

Print Name

Date

Date