

SCMA Ride Attendance and Release of Liability

Date: _____ Event: _____ Ride Leader: _____

I understand that neither the Southern California Motorcycling Association nor its officers and members can be held responsible for any aspect of my safety and that by participating in today's event, I do so voluntarily on my own assessment of my ability, the routes, and all facilities, and conditions, assuming all risk; and I release and hold the SCMA, its officers and members, and today's ride leader harmless for any injury or loss to my person or property which may result therefrom.

My Name and E-mail Address	Fee Paid \$	SCMA Member (Y/N)	AMA Member (Y/N)	My Cell Phone	Emergency Contact Name & Phone #	Signature
Name: _____ e-mail: _____					Name: _____ phone: _____	
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