



**SAFETY MINDED ATV ASSOCIATION
RALLY REGISTRATION FORM**

OHV regulations of NS must be observed at all times.
No alcohol allowed at clubhouse or on rally trail.
You must stay on rally route.

Operator's Name: _____
(please Print) First Last

Address: _____
Street Town/City

Contact Info: _____
Home Phone Cell Phone E-Mail (If Interested in future rally information)

ATV Info: _____
Plate # Make Model

Member of the All Terrain vehicle Association of Nova Scotia (ATVANS) _____
Yes No
Check One

Passenger's Name: _____
First Last

Name and phone number of person to be contacted in case of emergency (please print):

Name Phone Number

This rally involves safely driving your off highway vehicle over the designated route which encompasses mixed terrain and driving through a 6 ft. diameter tunnel under highway 103.

It is illegal to cross a controlled access highway, such as highway 103.

If you have a medical or physical limitation that may be a factor in your safe completion of the rally, we recommend that you do not enter.

**TO PARTICIPATE IN RALLY, THE WAIVER FORM
MUST BE READ AND SIGNED**

All passengers must sign a Waiver Form



RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

Please note that by signing this agreement, you give up the right to sue for any injury or damages, howsoever caused.

TO: The All Terrain Vehicle Association of Nova Scotia and the Safety Minded ATV Association (collectively called "the Company") and their directors, officers, employees, representatives and agents (collectively called "the Agents").

I, _____ hereby sign this agreement on behalf of personal representatives, my heirs, assigns and myself.

1. I agree as a precondition to my participation in all events organized by "the Company" and/or "the Agents" including, but not limited to: **Rallies, Fun Runs, Trail Rides** (Collectively referred to as "the Activities") and in further consideration of "the Company" allowing me to do so, that I will be strictly bound by the terms of this Release of Liability, Waiver of Claims, Assumption of Risk and Indemnity Agreement ("the Agreement").
2. I acknowledge that "the Activities" involve **inherent risks and dangers that may cause serious injury and possible death to participants.**
3. I fully understand the risks and dangers associated with my participation in "the Activities" and **accept same entirely at my own risk.**
4. I hereby **waive any and all claims** which I may have against "the Company" and "the Agents" and release "the company" and "the Agents" from **all liability** for injury, death, property damage or any other loss sustained by me as a result of my participation in "the Activities", **due to any cause whatsoever; including negligence, breach of contract, or breach of any statutory or other duty of care** by "the Company" and/or "the Agents".
5. I appreciate that "the Agreement" limits the liability of "the Agents" to the same extent as it limits the liability of "the Company", even though "the Agents" are not formal parties to "the Agreement".

I AM 16 YEARS OF AGE OR OLDER, AND I HAVE READ AND UNDERSTAND "THE AGREEMENT". I UNDERSTAND THAT THIS DOCUMENT CONTAINS A PROMISE NOT TO SUE "THE COMPANY" AND/OR "THE AGENTS" AND THAT IT CONSTITUTES A RELEASE OF LIABILITY AND AN INDEMNITY FOR ALL CLAIMS. IF I AM THE PARENT AND / OR GUARDIAN OF THE PARTICIPANT, I HAVE READ, UNDERSTAND AND EXECUTE "THE AGREEMENT" ON BEHALF OF MY CHILD / WARD.

WITNESS

SIGNATURE OF PARTICIPANT / PARENT / GUARDIAN

DATE

PRINT NAME

PRINT NAME OF CHILD / WARD