

# ***JERSEY SHORE TOURING SOCIETY***

<b>Ride Name:</b>		<b>Distance:</b>	<b>Date:</b>	
<b>Leader:</b>		<b>Pace:</b>	<b>Terrain:</b>	
<b>Member</b>		<b>Name</b>	<b>Emergency Phone</b>	<b>Cell Phone</b>
<b>Yes</b>	<b>No</b>	<small>* Helmets Required. Non-members must sign ride waiver *</small>	<b>(eg. Home #)</b>	<b>(if carried)</b>
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**Ride Name:**

**Leader:**

**Date:**

**SILENT SPORTS ASSOCIATION (SSA) RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("AGREEMENT")**

IN CONSIDERATION of being permitted to participate in any way in Jersey Shore Touring Society ("CLUB") sponsored Bicycling Activities ("Activity") I for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further acknowledge that the Activity will be conducted over public roads and facilities open to the public during the Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Club, the SSA, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATION; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOT WITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

**PARTICIPANT'S SIGNATURE**

**PRINTED NAME AND PHONE NUMBER**

**DATE**

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**Signature & Title of Witness**

**Address**

# Silent Sports Incident Report



**Note - This report is to be completed by: an official member of the organization which may be the event director, a bike tour guide, an officer of the club, the ride leader, etc. It should NOT to be completed by the injured party.**

- 🚲 It is important to have a written incident report on file regarding injuries, property damage or other incidents that may result in a claim against your organization. Many claims allege negligence on the part of the organization, and written reports prepared immediately after an incident occurs are invaluable in defending these types of claims.
- 🚲 In the event of a serious injury, it is important to ask for written statements from witnesses and individuals actually involved in the incident.
- 🚲 Please complete the following Incident Report and return this to McKay Group with any other pertinent information such as a police report, witness statements, pre-event inspection report, routine facility maintenance report, photos taken at the time of the incident, etc. Your organization should retain a copy of the report for a minimum of 3 years, as many lawsuits are filed long after an injury occurs.

## GENERAL INFORMATION

Name of Club/Organization: \_\_\_\_\_

Event/Activity: \_\_\_\_\_

Date and Time of Report: \_\_\_\_\_

Reporter's Name: \_\_\_\_\_ Reporter's Title: \_\_\_\_\_

Reporter's Phone #: \_\_\_\_\_ Reporter's Email: \_\_\_\_\_

## INCIDENT INFORMATION

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_ AM PM

Location of Incident: \_\_\_\_\_

Provide a full description of all events leading up to & including the incident (*attach as separate page if needed*):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe injury (specify where on body, right or left side, etc.) \_\_\_\_\_

\_\_\_\_\_

Witnesses:

Full Name	Address	Statement Attached?	
_____	_____	YES	NO
_____	_____	YES	NO
_____	_____	YES	NO
_____	_____	YES	NO

