

EVENT WAIVER FORM-AMVETS RIDERS OF INDIANA

In consideration of the AMVETS Riders of INDIANA permitting me to participate in this event, I hereby And for (my) heirs, executors, administrators, and / or assigns, waive any and all rights and claims of any nature that (I) may have against the AMVET, AMVETS RIDERS of INDIANA, or any AMVETS POST RIDERS of INDIANA. Including Officers, Employees, Agents, Chapters, Assignees, Licenses, and cooperating entitles, Their heirs, executors and all injuries or damages of any nature which (I) may suffer while taking part In any Activities connected with this event. Consent is also hereby given to use (my) name, picture, writings, or Biographical information, and audiotape recordings and sound or silent motion pictures of (me) in Any media for editorial, educational, promotional, and advertising purposes, for the contributions, And for any other purpose in furtherance of the corporate purposes and objectives of the DEPARTMENT Of INDIANA AMVETS RIDERS.

This RELEASE and CONSENT shall be binding upon (my) heirs, executors, administrators, and / or assigns.

I hereby declare that I have read and understand this waiver:

Signature of Rider _____ Date _____ POST# _____
Address _____ City _____ State _____ Zip _____
Emergency Contact Person _____ Phone# _____

I hereby declare that I have read and understand this waiver:

Signature of Passenger _____ Date _____
Address _____ City _____ State _____ Zip _____
Emergency Contact Person _____ Phone# _____

**2nd
ANNUAL
INDIANA**



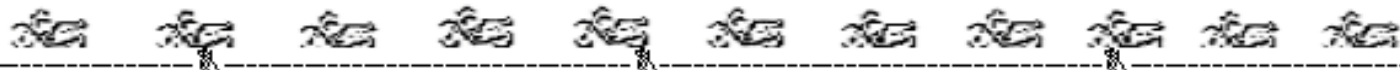
**RIDERS
BULL ROAST RALLY**

**HOSTED BY
CHAPTER 2000 BLOOMINGTON, IN
AUGUST 9TH 2008**

Kenny Strong & The Headliner Band

LIMITED PRIMITIVE CAMPING

SIGNAL FIRE



2ND ANNUAL 2008 BULL ROAST RALLY PRE-REGISTRATION

**To guarantee a t-shirt, your form must be
received by July 9th 2008**

Riders Name _____ AMVETS POST # _____

Address _____ City/State/Zip _____

Telephone _____ Emergency Contact (name/phone) _____

Riders Registration	\$25.00	\$	_____
Passenger Registration	\$10.00	\$	_____
Saturday AM Breakfast	\$ 5.00	\$	_____
Sunday AM Breakfast	\$ 5.00	x _____ = \$	_____
T-Shirt (# & size) S ___ M ___ L ___ XL ___ XXL ___	Free		_____

1 Free T-Shirt per Pre Registrant

Free Limited Primitive Camping (first come, first serve)

Check box if camping

Motel Reservations contact Chuck Wilson (812) 812-825-6310

e-mail chuson60@hotmail.com

Information Contact Hawk (812) 320-6710 e-mail ridge_outlaw@yahoo.com

Lady Hawk (812) 320-6757 e-mail hawkins2@indiana.edu

RIDERS WAVER FORM MUST BE FILLED OUT ON BACK OF THIS FORM

Make checks payable to the **AMVETS RIDERS POST 2000** and mail to , **AMVETS RIDERS POST 2000, 5227 W. AIRPORT ROAD. BLOOMINGTON, III, 47403**