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Motorcycle Advanced Riding Skills - M2 To M Training

Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement

BY SIGNING THIS DOCUMENT, YOU WILL GIVE UP CERTAIN LEGAL RIGHTS,

	INCLUDING THE RIGHT TO SUE, CLAIM DAMAGES AND SEEK COMPENSATION FOR
	ANY INJURIES YOU MAY SUSTAIN. INITIAL: /
1.	, have voluntarily registered to participate in a motorcycle skills and safety course (hereinafter the "Course") provided by [Motorcycle Training Organization (hereinafter the "MTO Inc." which term includes all directors, officers, employees, contractors, instructors, representatives, servants, assigns, agents and volunteers as well as the ([Canada Safety Council]. The course shall be held at the SHERIDAN COLLEGE INSTITUTE OF TECHNOLOGY AND ADVANCED LEARNING (hereinafter "Sheridan College") and/or The HUMBER COLLEGE INSTITUTE of TECHNOLOGY and ADVANCED LEARNING (hereinafter "Humber College"). Any and all releases of liability contained herein shall include Sheridan College's and Humber College's governors, directors, officers, employees, contractors, instructors, representatives, servants, assigns, agents and volunteers).
2.	I understand that the signing of this document is a required component of the Course. I acknowledge that I am signing this document and I am agreeing to be bound to the terms within it, as good and valuable consideration in exchange for the MTO Inc. permitting me to participate in the Course.
	INITIAL: /
As	sumption of Risk
3.	I understand and acknowledge that riding a motorcycle/learning to ride a motorcycle is an inherently dangerous activity. I also am aware that riding or learning to ride a motorcycle and participating in the Course involves many risks, dangers and hazards including the risk of sustaining persona injury. Such injuries include but are not limited to muscular injuries, soft tissue injuries, broken bones, bruises, scrapes, cuts, sprains, dislocation, head injuries, facial eye and/or dental injuries, other severe injuries such as paralysis or death. By signing this document, I am voluntarily accepting the risks identified above and assuming all responsibility for any and all injuries, including death that I may sustain during, because of, arising out of, in connection with or in relation to my participation in the Course. INITIAL: /
4.	I understand and acknowledge that the motorcycle training area contains many obstacles including but not limited to buildings, concrete barriers, light stands, asphalt imperfections, debris, trees, training aids, other motorcycles or motorized vehicles, pedestrians, other students on foot or or other motorcycles and course instructors and that all obstacles in the motorcycle training area pose a risk of serious personal injury or death. By signing this document I am voluntarily accepting the risk that I may sustain injuries, including serious injuries or even death because of obstacles or hazards which exist in the motorcycle training area and that I am assuming all responsibility for any and all injuries, including death that I may sustain during, because of, arising out of, in connection with or in relation to my participation in the Course. INITIAL: /
5.	I understand and acknowledge that in addition to the conditions of the motorcycle training area, I am at risk for serious injury or death due to my inexperience and inability to operate a motorcycle, the inexperience and inability of other students to operate a motorcycle, the malfunctioning or misuse of any motorcycle operated by myself or other course participants, and the failure of the MTO Inc. to safeguard me from the risk, hazards and dangers associated with learning to ride a motorcycle including but not limited to the negligence or other failure on the part of the MTO Inc. to train and instruct me in the operation of a motorcycle. I understand and acknowledge that as a result of my participation in the Course, I may cause injury to others and that I may damage property owned by others. By signing this document, I am voluntarily accepting the risks identified above and assuming all responsibility for any and all injuries, including death that I may sustain during, because of, arising out of, in connection with or in relation to my participation in the Course. INITIAL: /
6.	For greater certainty and so as to avoid any uncertainty, I understand the risks associated with my participation in the Course and I fully accept al risks including the usual risks one would associate with riding and learning to ride a motorcycle AS WELL AS THE RISK THAT THE MTO Inc. MAY BE NEGLIGENT, OR OTHERWISE FAIL TO PROVIDE A SAFE LEARNING ENVIRONMENT WHEN SUCH NEGLIGENCE OR FAILURE COULD LEAD TO INJURY OR DEATH. INITIAL: /

Disclaimer and Release and Waiver of Claims

- 7. By signing this document, I hereby release the MTO Inc., Humber College and Sheridan College from any and all responsibility and from any liability for:
 - a. any losses, injuries, death or damages that I may sustain:
 - b. any lost income, expenses or costs I may incur, and;
 - c. any injuries, death or damage that I may cause to others

during, because of, arising out of or in relation to my participation in the Course, however such losses, injuries, death damages, expenses or costs may have been caused, even if such losses, injuries, damages, expenses or costs may have been caused or were caused by the negligence of the MTO Inc., Humber College or Sherida College. INITIAL: /
For greater certainty I understand and agree that by signing this document, I WILL BE GIVING UP MY LEGAL RIGHT TO SUE THE MTO Inc., Humber College and Sherida College IN THE EVENT THAT I SUSTAIN ANY LOSSES, INJURIES, DEATH, OR DAMAGES because of, arising out of or in relation to my participation in the Course. understand that this document is a RELEASE OF MY RIGHT TO SUE the MTO Inc., Humber College and Sheridan College and that this document may be used agains me in a court of law should I sue the MTO Inc., Humber College or Sheridan College. I further understand that the term "Right to Sue" means the right to make a claim bring a lawsuit or otherwise advance any action against the MTO Inc., Humber College or Sheridan College for any losses, injuries, death or damages that I may sustain and for any expenses or costs I may incur during, because of, arising out of or in relation to my participation in the Course. INITIAL: /
I also understand and acknowledge that the waiver and release of my legal right to sue the MTO Inc., Humber College or Sheridan College as set out in paragraph 7 encompasses any rights I may have for contribution and indemnity from the MTO Inc., including but not limited to the right to add the MTO Inc., Humber College an Sheridan College to any claim or lawsuit in the event that I am sued for any matter because of, arising out of, in connection with or in relation to my participation i the Course. INITIAL: /
I expressly acknowledge that the waiver of my legal rights as set out in paragraph 7 above extends both to losses, injuries, death, damages, costs and expenses whice result from the usual risks one would associate with riding and learning to ride a motorcycle AND TO losses, injuries, damages, cost and expenses WHICH MAY RESULTED FROM THE NEGLIGENCE OF THE MTO Inc. AND FROM ANY FAILURE ON THE PART OF THE MTO Inc. TO TAKE CAREFUL MEASURES AVAILABLE OR UNDERSTOOD TO BE NECESSARY FOR SAFETY IN THE CIRCUMSTANCES. INITIAL: /
For greater certainty and so as to avoid any uncertainty, I understand that by signing this document I AM GIVING UP MY RIGHT TO SUE THE MTO Inc., HUMBE COLLEGE, SHERIDAN COLLEGE, and the CANADA SAFETY COUNCIL for any losses, injuries, death, damages, cost or expenses, due to any cause whatsoever, EVEN such losses, damages, injuries, costs or expenses were caused BY THE NEGLIGENCE OF THE MTO Inc., Humber College or Sheridan College OR BY THE FAILURE OF TH MTO Inc., Humber College or Sheridan College TO TAKE CAREFUL MEASURES AVAILABLE OR UNDERSTOOD TO BE NECESSARY FOR SAFETY IN THE CIRCUMSTANCES. INITIAL: /
d Harmless and Indemnity
In addition to my assumption of the risks associated with riding or learning to ride a motorcycle, and in addition to waiving my legal right to sue the MTO Inc., Humber College and Sheridan College as per paragraphs 7 through 11, I also hereby agree to indemnify and hold harmless the MTO Inc., Humber College and Sheridan College against and from all claims, demands, actions, causes of action, suits, debts, liabilities, demands, judgments and damages whatsoever, which may be brought against or sought from the MTO Inc., Humber College or Sheridan College because of, arising out of, in connection with or in relation to my participation in the Course. INITIAL: /
litional Agreements
This document and this agreement and the commitments I have made in the document, shall be effective and binding upon my heirs, next of kin, successors, assigns executors, administrator and/or legal representatives in the event of my death or incapacity. INITIAL: /
I acknowledge that:
 a. I am at least 18 years of age; or if I am not, my parent or guardian must co-sign the paragraphs requiring initials and sign the Declaration of Guardianship of a Minor Child. b. I have read this document in its entirety and appreciate my rights, obligation and liabilities set out herein; c. I have been given the opportunity to seek independent legal advice with respect to this document and that I have received such advice or waived my right to do so; d. I am voluntarily participating in this course and voluntarily signing this document.

15 I understand that if I do not sign this document in full, I will not be permitted to participate in this Course and that I will be entitled to a full refund of my Course fees.

Notice: Pictures may be taken on the course for purposes of being used in social media and on our website. If you **DO NOT** wish to have facially recognizable pictures taken, please notify the photographer by talking to them or waving them off or stepping out of view of the camera. Some pictures may be wide angle views of the larger training area where individuals will not be facially recognizable.

Motorcycle Training Organization of Halton-Peel M2X Eligibility Statement

Eligibility Statement I hereby acknowledge that:

Witness Name

- 1. I am eligible for this M2 Exit Course and examination towards my M licence class by virtue of the fact that I have held an M2 licence class designation for not less than 22 months, or not less than 18 months if I received my M2 licence class designation with a Recognized Training Authority.
- 2. My M2 licence class designation is valid and will be for the duration of this M2 Exit Course.
- 3. I am solely responsible for the motorcycle I will use for the course and any testing associated therewith and that such motorcycle is and will be fit for the roads, will be in good working order and condition, will be validly insured, registered and plated and will otherwise be safe and suitable for use in the M2 Exit Course (including the testing portion).
- 4. I have reviewed and understand the requirements set forth in the Safety Inspection Checklist, which accompanies this Eligibility Statement and the information, representations and warranties provided by me in such Safety Inspection Checklist are true and accurate and will be true and accurate for the duration of the course.
- 5. The following information is accurate and true as attested to by my signature below.

Date:		
Student Name	Student Signature	
Witness Name	Witness Signature	
	F GUARDIANSHIP OF A MINOR O	
I, (Printed Name of Parent/Guardian)		
HEREBY DO CERTIFY THAT I AM THE PARENT OR L	EGAL GUARDIAN OF:	
(Student Name)		AND I hereby give consent
for my son/daughter (Student Name) in the Canada Safety Council Motorcycle Training STATED IN THE ABOVE WAIVER OF CLAIMS.		to participate as a student
Signature of Parent/Guardian	Date	
Parent/Guardian Driver's Licence Number:	- XXXXX - Omit middle block of digits	
Alternate I.D.:		

Witness Signature

Motorcycle Training Organization Student Information

Last Name:		_ Given Names:			
Driver's Licence:		Expiry:		Class:(ex. G	M2, ACM2, no Z)
Address:					
City:				Postal Code:	
Phone:		Email: _			
Date of Birth:	/yyy /mm /	Age:			
	act Name: (not a pe				
relephone: Home.	:C	.eii:	Keiatio	nsnip:	
	MEDICA	L INFORMATIO	N AND HIST	ΓORY	
Allergies:	Heart Condition:	Physical Co	ndition: \square	Other: \square	None:
Course Relevant	Details:				
If you answered yes	to any of the above,	, please speak to yoι	ır instructor a	nd provide any furt	her details
Motorcycle Year, M					
Licence Plate:		Validation s	ticker expiry	[,] date:	
Insurance Carrier N	lame:				
Policy Number:		Expir	y:		
In Witness Whereo	f I have hereunto	set my hand this _	day o	of	, 20
Student Name:		Student	: Signature:		
Witness Name:		Witness	s Signature:		