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|-----------|
| Bike No   |
| STAFF USE |

### Bike Registration

|                              |
|------------------------------|
| <b>Name:</b>                 |
| <b>Address:</b>              |
| <b>City / State / Zip:</b>   |
| <b>Phone number:</b> (     ) |
| <b>Email address:</b>        |
| <b>Year / Make / Model</b>   |
| <b>Description of bike:</b>  |

The **Kentucky Kick Down** is Friday September 14<sup>th</sup> 4:00PM to Sunday September 16<sup>th</sup> at 2:00PM, at Louisville Turners, 3125 River Rd, Louisville, KY 40207, rain or shine.

Each entry must be accompanied by registration fee, \$25 before 8/31/17, \$30 thereafter. Each entry will receive a number plaque\*, a chance at an award, admittance of one motorcycle and rider. **HOLDING SPACES IS NOT PERMITTED.** Motorcycles must be twenty-five years or older any make or model. Must be at the show before 2pm. All drivers must be licensed to drive and have proper liability insurance. **NO WEAPONS OR OUTSIDE ALCOHOL IS ALLOWED ON THE PROPERTY, NO BURNOUTS.**

I fully understand & acknowledge that; (a) serious risks & dangers exist in my use of motorcycles; (b) my participating in motorcycle activities may result in my illness, injury, & even death; (c) these risks & dangers may be caused by negligence of the owners, employees, officers or agents of KKD; negligence of participants, negligence of others, accidents, breaches of contract, & forces of nature or other causes; & (d) by my participation in these activities, I hereby assume all risks, dangers, and responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, agents, officers, employees of KKD, or by any other person.

I, on behalf of myself, my personal representatives, & my heirs, hereby voluntarily agree to release, waive, discharge, hold harmless, defend, & indemnify KKD & its owners, agents, officers, & employees from any & all claims, actions, or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my participation in KKD festival activities. I specifically understand that I am releasing, discharging, & waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the owners, agents, officers, or employees of KKD.

I also hereby give KKD permission to any photographs taken during my participation in events of the festival for regular business reasons (reprint, upload, broadcast, promotions, etc.).

I agree the terms of this Agreement shall be governed by and interpreted according to the laws of Kentucky & venue shall be the court of competent jurisdiction in Jefferson County, Kentucky.

|                   |              |
|-------------------|--------------|
| <b>Signature:</b> | <b>Date:</b> |
|-------------------|--------------|

Mail this form with check or money order to:  
**Kentucky Kick Down 1807 Harvard Dr. Louisville, KY 40205**  
**More info:** [www.kentuckykickdown.com](http://www.kentuckykickdown.com) or [scott@kentuckykickdown.com](mailto:scott@kentuckykickdown.com)