



ONE TIME RELEASE AND WAIVER OF LIABILITY
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This Release and Waiver of Liability ("Release") executed on this date _____, by _____ (the "Member") in favor of EMS Roaddocs IL, and its partner organizations, and their directors, officers, employees, and agents (collectively "EMS Roaddocs National"). The Member desires to join the EMS Roaddocs IL, engage in activities related to being a Member and does hereby freely, and without duress, execute the Release under the following terms:

1. **Assumption of the Risk.** The Member understands that joining EMS Roaddocs IL may include activities that may be hazardous to the Member, including, but not limited to, operating a motorcycle, providing emergency medical aid as consistent with applicable Good Samaritan statutes, securing and providing a safe environment to provide aid and assistance consistent with applicable statutes and other related tasks (the "activities"). Knowing such, the Member hereby expressly and specifically assumes the risk of injury or harm in the Activities and hereby releases EMS Roaddocs IL from any and all liability including, but not limited to, injury, illness, death, liability, property damage and/or other damages of any nature whatsoever resulting from or directly or indirectly related to the Activities.
2. **Waiver and Release.** The Member does hereby release and forever discharge and hold harmless EMS Roaddocs IL and its successors and assigns from any and all liability, claims, and demands, of whatever nature, either in law or in equity, which arise or may hereafter arise from the Member joining EMS Roaddocs IL. The Member understands and acknowledges that this Release discharges EMS Roaddocs IL from any liability or claim that the Member may have against EMS Roaddocs IL with respect to any bodily injury, personal injury, illness, death, property damage or any other claim of any nature whatsoever that may result from the Member's participation in EMS Roaddocs IL program. The Member also understands that, except as otherwise agreed to by EMS Roaddocs IL in writing, EMS Roaddocs IL does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, liability, workers' compensation, property or disability insurance in the event of injury or illness.
3. **Medical Treatment.** Except as otherwise agreed to by EMS Roaddocs IL in writing, the Member does hereby release and forever discharge EMS Roaddocs IL from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the EMS Roaddocs IL.
4. **No Alcohol or Drug Consumption.** The Member expressly agrees that he/she will not be under the influence of alcohol, drugs, or anything that could impair his/her faculties and/or judgement while engaged in activities.
5. **Insurance.** The Member understands that, except as otherwise agreed to by EMS Roaddocs IL in writing, that EMS Roaddocs IL does not carry or maintain health, medical, liability, workers' compensation and property damage or disability insurance coverage for any Member. Each Member is expected to arrive with medical or health insurance coverage in effect and current insurance coverage in effect for the vehicle the Member will be operating.
6. **Other.** Member expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Illinois and that this Release shall be governed by and interpreted in accordance with the internal laws of the State of Illinois without reference to choice of law issues. The Member agrees that in the event that any clause or provision of the Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

IN WITNESS WHEREOF, Member has freely executed this Release on the day and year first above written.

Member Signature _____ Print: Member Name _____

Address _____ Phone _____ Email _____

Sponsor Signature _____ Print EMS Roaddocs IL Sponsor Name _____