

## RELEASE OF LIABILITY

I, \_\_\_\_\_ (herein "Participant"), hereby acknowledge and agree to the following, as a condition of **{Riding and representing NF Scooters.com .}**:

1. My involvement and/or participation in **{riding}** is voluntary, and I am acting under my own free will.
2. There is a risk of danger, bodily harm, injury, emotional stress, or death as a result of my participation. The risks arise from **{Riding in traffic, losing control of your scooter, or any other involuntary or outside forces of nature}**.
3. There is the potential for risks and dangers that may not be obvious or reasonably foreseeable at this time.
4. I do not have any medical ailments, physical limitations, or mental disabilities that will affect my ability to participate in **riding and representing NF Scooters.com**.
5. **NF Scooters.com** undertakes no direct legal or financial responsibility for my personal safety or well being when I am participating in **riding scooters**.
6. I assume the risks, including, but not limited to, those outlined in Section 3 of this agreement.
7. I forever release **Nf Scooters** from any and all claims and causes of action that I or my representatives now have or may have in the future for personal injury, property damage or wrongful death occurring to me, arising out of participation in **riding scooters**.
8. I am 100% liable for all medical expenses incurred as a result of any injury or property damage during my participation in **modeling and riding scooters**.
9. In the event that any one or more of the provisions of this agreement shall be held to be invalid, illegal, unenforceable or in conflict with the law according to the jurisdiction of the state of **Idaho**, the remaining portions will not be invalidated, and shall remain in full force and effect.

10. This is a legally binding contract, but it is not meant to pronounce any claims or defenses that are legally prohibited.

I attest that I have read and understand this document, and agree to all the provisions listed above.

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Participant Signature

Date:

\_\_\_\_\_  
Witness Name

\_\_\_\_\_  
Witness Signature

Date: