



TAILGUNNER

Participant Application

THE VIPER RIDE PLUS+™

Visually Impaired Patriots Experiencing the Road

Thank you for your interest in participating in THE VIPER RIDE PLUS+™, an exciting activity established for US Military Veterans who are blind, visually impaired, low vision, or otherwise physically handicapped in any way that prevents him/her from driving a motorcycle. VIPER stands for "Visually Impaired Patriots Experiencing the Road". You have the option to bring along a friend or family member to participate with you.

Our promise is to provide an event that is safe and enjoyable. We offer an awesome opportunity to go with us on a group motorcycle ride, along with many other veterans. You'll meet a number of other veteran and non-veteran volunteers who are interested and dedicated to making your time with us fun, fulfilling, and memorable. All our volunteers are there to assist you in any way, if required.

As a TAILGUNNER, (the code name we use for our dignified motorcycle passengers,) you will be our guest passenger on a group motorcycle ride covering some of the best cycling roads in southeastern Wisconsin. You will be driven by your PILOT, an experienced motorcycle owner/operator volunteering to serve as your driver and ride escort. Following an enjoyable ride, you will have ample opportunity to meet and mingle with many of your friends, both old and new, and with the folks who have volunteered to make your day special. You will also be provided a wonderful meal. All of this is provided at no cost to you or your guest.

THE DATE OF THIS VIPER EVENT

SUNDAY

August 18th, 2019

Please complete all areas on this application form and return to us via postal mail or email. In order to ensure your safety and maximize your enjoyment, someone from our organization will contact you after reviewing your application to discuss any specific or special needs you may have.

Return completed form via Email to:
tailgunners@theviperride.org

Or mail in a stamped envelope to the following address:

**THE VIPER RIDE PLUS+
7243 HUCKLEBERRY COURT
GREENDALE, WI 53129-2748**



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APPLICANT IS A **VETERAN** OR A **FRIEND/FAMILY MEMBER**

FULL NAME:
(as it appears on your government issued ID)

ADDRESS:

CITY, STATE, ZIPCODE:

NICKNAME or PREFERRED NAME:
If other than full name

HOME PHONE:
Include area code

MOBILE PHONE:
Include area code

PREFERRED EMAIL ADDRESS:

DATE OF BIRTH:
MM/DD/YYYY

HAVE YOU BEEN A PASSENGER ON A MOTORCYCLE?
YES or NO

LIST YOUR BRANCH OF SERVICE:

EMERGENCY CONTACT NAME:

EMERGENCY CONTACT PHONE:
Include area code

EMERGENCY CONTACT RELATIONSHIP:

YOUR HEIGHT / WEIGHT:
Height Weight

ADULT T-SHIRT SIZE
(SM – MED – LRG – XL – 2XL – 3XL)

LIST ANY SPECIAL NEEDS OR ACCOMODATIONS YOU MAY HAVE TO ATTEND THE RIDE. THE ORGANIZERS MUST KNOW THESE THINGS TO ENSURE YOUR SAFETY AND ENJOYMENT AT THIS EVENT

Please Note: **Completing and submitting this application does not guarantee a place in the ride.**



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How did you learn about THE VIPER RIDE??

Did you participate in a previous VIPER RIDE?

YES or NO

If possible, would you like to ride with the same pilot this year?

YES or NO

Would you prefer a 2-wheel motorcycle, Trike, or Sidecar?
(No guarantees can be made regarding the style of motorcycle you will ride on)

If you are participating friend or family, please provide the name
of the participating veteran you are attending with

PLEASE REVIEW THE FOLLOWING ACKNOWLEDGMENTS CAREFULLY AND SIGN:

The undersigned acknowledges and agrees that:

1. I understand photographic and video equipment may be used to memorialize and document **THE VIPER RIDE** event. As such, I understand my image may appear in a public forum, such as the print or broadcast media or on a website, to acknowledge, promote, or advance the work of the **THE VIPER RIDE** program. I understand images may be in the form of videos, photographs, or other artistic or recorded media, to be used for the purposes of advertising, promoting, and/or publicizing **THE VIPER RIDE** via any media deemed acceptable by the organization. As a participant, I hereby release the photographer and **THE VIPER RIDE** organization from all claims and liability relating to said photographs or images. I hereby grant perpetual and irrevocable permission for my images to be used by **THE VIPER RIDE**, the VIPER Organization, any event sponsors, or any parties, individuals, or organizations acting as an agent or delegate of the ride or the managing ride organization. I also hereby waive any and all rights of compensation or ownership thereto.
2. I further understand and agree that medical care and/or medical coverage is not the responsibility of, nor provided by, **THE VIPER RIDE** or the VIPER Organization. I accept the risks associated with **THE VIPER RIDE** activities and will not hold **THE VIPER RIDE** or the sponsoring organizations responsible for injuries or damages incurred by me while participating in the **THE VIPER RIDE** event.
3. I agree to provide information to members of the VIPER organization, upon their request, regarding any special needs or medical issues that may affect my safety, comfort, or enjoyment while attending the event. All information provided shall be considered private and shall not be released to any other party or parties outside of the VIPER organization. I understand the VIPER organization will use this info solely to make preparations, plans, and decisions regarding the event, including my ability to participate.

SIGNED: _____ **DATE:** ____/____/____

Please Note: Completing and submitting this application does not guarantee a place in the ride.