

# Battle of the Bay Police Motorcycle Skills Registration

Registration is available online or by mail. The cost is \$75 and includes one banquet ticket. If mailing, send completed form and payment by check to:

## **Cooking for Cops**

9266 Sand Ridge Rd

Citronelle, AL 36522

Email: roberth7275@aol.com

Name

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Date of Birth

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Email

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Phone Number

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Address

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Emergency Contact Name

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Emergency Contact Phone

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Agency Name

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T-Shirt Size

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RV/Camper Space Needed (Yes/No)

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Banquet Attendance (Yes/No)

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## **Rider Classification**

Expert – Any participant who has competed in 3 or more competitions or has placed in the top three at the intermediate level.

Intermediate – A participant who has placed in the top three in the Novice level or who has competed in three or more competitions.

Novice – A participant who has not placed in the top three of any competition or who has not entered more than three previous competitions.

Select Rider Classification

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## **Motorcycle Event Class Categories**

Harley Davidson FL Windshield

Harley Davidson FL Fairing

Other Harley Davidson  
Honda  
B.M.W.  
Other (please specify)

Selected Motorcycle Class \_\_\_\_\_

## Banquet & Payment Details

Number of Additional Banquet Tickets (\$25 each) \_\_\_\_\_

Total Enclosed (\$) \_\_\_\_\_

Registration Fee: \$75 (includes 1 banquet ticket). Additional banquet tickets are \$25 each.

## Waiver & Liability Agreement

By signing below, I acknowledge and agree to the following:

I understand that participation in motorcycle training and competition activities involves inherent risks, including serious injury, death, and property damage.

I voluntarily assume all risks associated with my participation in Battle of the Bay Mobile 2026.

I release and hold harmless the event organizers, sponsors, instructors, volunteers, host venue, and affiliated agencies from any and all claims or liability arising from my participation, including claims based on negligence to the fullest extent permitted by law.

I agree to indemnify and hold harmless the Released Parties from any claims, damages, or expenses resulting from my participation.

I certify that I am physically able to participate and will follow all rules, instructions, and safety requirements.

I understand I am responsible for my own medical and insurance coverage.

I authorize emergency medical treatment if necessary and accept responsibility for any related costs.

I grant permission for photos and video taken during the event to be used for promotional purposes.

I understand this agreement is governed by the laws of the State of Alabama.

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

Printed Name \_\_\_\_\_

Date \_\_\_\_\_