

APPLICATION FOR MEMBERSHIP

(please print)

Name #1 _____ Name #2 _____

#1 Birthday _____ #2 Birthday _____

Address _____ City _____ Zip _____

Phone number in our Roster? YES NO If yes, Phone _____

E-Mail address in our Roster? YES NO If yes, E-Mail _____

- Please indicate your membership type:
 - New Member Family
 - Renewal Individual

- Please indicate what distance, pace and type of riding interest you most:

Distance (Miles):

Name #1 0-20 21-40 41-60 61+ 100+

Name #2 0-20 21-40 41-60 61+ 100+

Paces:

Name #1

Leisurely (10-12mph)

Moderate (13-15mph)

Brisk (16-18mph)

Fast (19+ mph)

Type of Riding:

Name #1

Mountain Biking

Road Biking

Tandem

Overnight Tours

Name #2

Leisurely (10-12mph)

Moderate (13-15mph)

Brisk (16-18mph)

Fast (19+ mph)

Name #2

Mountain Biking

Road Biking

Tandem

Overnight Tours

- Do you have minor children who will be riding?
 - YES NO

COMPLETE, SIGN & MAIL TO:

Attn: Membership

John Field, DDS

817 Coffee Road, Ste A-2

Modesto CA 95355

**** MEMBERSHIPS RUN FROM APRIL TO APRIL**

New Memberships are calculated as follows:

Single Memberships:

Join in Jan. thru June, pay \$25.00 (to April of next year)

Join in July thru Sept., pay \$20.00

Join in Oct. thru Dec., pay \$15.00

Family Memberships: (2+ members of a family)

Join in Jan. thru June, pay \$35.00 (to April of next year)

Join in July thru Sept., pay \$25.00

Join in Oct. thru Dec., pay \$15.00

(CHECKS MADE PAYABLE TO SCBC)

League of American Wheelmen dba League of American Bicyclists (LAB) Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement (Agreement)

IN CONSIDERATION of being permitted to participate in any way in Stanislaus County Bicycle Club (Club) sponsored Cycling Activities (Activity) I for my myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree and represent that I understand the nature of Cycling Activities and that I am Qualified, in good health, and in proper physical condition to participate in such Activity.

2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH (RISKS); (b) these Risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Club, the LAB, their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASES" herein (FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATION; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the RELEASES, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY OF THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PARTICIPANT'S SIGNATURE

PRINTED NAME

DATE

PARTICIPANT'S SIGNATURE

PRINTED NAME

DATE

1) _____

2) _____