

## Blair Bicycle Club (BBC) Membership Form

To become a member of the Blair Bicycle Club, complete and sign this form. Annual membership covers the time period: April 1 - March 31.

<b>New Member</b>		<b>Renewing Member</b>		<b>Individual Membership \$15</b>		<b>Family Membership \$25</b>	<small>BBC data block</small>
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Mail check or money order to: **Blair Bicycle Club, PO BOX 105, Hollidaysburg PA 16648**

<b>First Name</b>	<b>Last Name</b>	<b>Spouse / Family Member (FM) Name (Family Membership only)</b>	
<b>Address</b>			
<b>City</b>		<b>State</b>	<b>Zip Code</b>
<small>If you want to receive information about BBC rides and activities via e-mail or telephone, please provide the following:</small>			
<b>E-Mail Address</b>		<b>Telephone #</b>	<b>Cellphone #</b>

<b>What is your main bike riding interest?</b>	<input type="checkbox"/> Road	<input type="checkbox"/> Fitness	<input type="checkbox"/> Recreational	<input type="checkbox"/> Mountain	<input type="checkbox"/> Commuter	<input type="checkbox"/> Other:
<b>Will you allow your name /address/e-mail address / telephone number to be distributed to other BBC members?</b>	<input type="checkbox"/> <b>Yes</b>		<input type="checkbox"/> <b>No</b>			
<b>Would you like to be on one of the BBC committees?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>If YES, which committee(s)?</b>	<input type="checkbox"/> Ride	<input type="checkbox"/> Social	<input type="checkbox"/> Newsletter
<b>Will you lead a club ride?</b>	<input type="checkbox"/> <b>Yes</b>		<input type="checkbox"/> <b>No</b>			

The following form must be signed by all adult applicants 18 years of age and older.

Any person under 18 years of age must have the signature of their parent or legal guardian.

### Release Form and Waiver of Liability, Assumption of Risk and Indemnity, and Parental Consent Agreement.

**I, (Print Name),** \_\_\_\_\_ **and I, (Print Name Spouse/FM),** \_\_\_\_\_

**In consideration of being permitted to participate in any way in BLAIR BICYCLE CLUB, INC.'s club sponsored Bicycling Activities ("ACTIVITY"),**

I, for myself, my personal representatives, assign heirs, and next of kin:

1. **ACKNOWLEDGE**, agree and represent that I understand the nature of bicycling activities and that I am qualified, in good health, and in proper physical condition to participate in such ACTIVITY. I further acknowledge that the ACTIVITY will be conducted over public roads and facilities open to the public during the ACTIVITY and upon which hazards of traveling are to be expected. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the 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 conditions in which the ACTIVITY takes place, or THE NEGLIGENCE OF THE 'RELEASEES' NAMED BELOW,
  - c. there may be other RISKS and social and economic losses, either not known to me or not readily foreseeable at the time, and I FULLY ACCEPT AND ASSUME ALL SUCH RISK AND ALL RESPONSIBILITY FOR LOSSES, COSTS AND DAMAGES I incur as a result of my participation in the ACTIVITY or that of the listed minor(s) participating in the ACTIVITY.
3. **HEREBY RELEASE, DISCHARGE, AND CONVENANT NO TO SUE BLAIR BICYCLE CLUB, INC.**, their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of equipment or premises on which the ACTIVITY takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DEMANDS ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE 'RELEASEES' OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTIONS OF RISK, AND INDEMNITY AGREEMENT, I or anyone on my behalf, makes a claim against any of the 'RELEASEES', I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability damage, or cost any which may incur as the result of any such claim.
4. **AGREE TO OBEY ALL TRAFFIC LAWS AND REGULATIONS**, performing safely while riding and **TO WEAR A HELMET WHILE RIDING.**

**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 out any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to 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.**

**Signed** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signed FM** \_\_\_\_\_ **Date:** \_\_\_\_\_

### MINORS (UNDER 18 YEARS OF AGE)

**I, (Print Name of Parent/Guardian),** \_\_\_\_\_

The minor's parent and/or legal guardian, understand the nature of bicycling activities and the minor's experience and capabilities, and believe the minor to be qualified, in good health, and in proper physical condition to participate in such ACTIVITY. I hereby release, discharge covenant not to sue, and agree to indemnify, save, and hold harmless each for the 'RELEASEES' from all liability, claims, demands, losses, or damages on the minors account caused or alleged to be caused in whole or in part by the 'RELEASEES' or otherwise, including negligent rescue operations and further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the 'RELEASEES' named above, I will indemnify, save, and hold harmless each of the 'RELEASEES' from any litigation expenses, attorney fees, loss liability, damage, or cost any which may incur a the result of any such claim.

**Signed (Parent/Guardian)** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name of Minor** \_\_\_\_\_ **Age of Minor (under 18 years old)** \_\_\_\_\_

**Name of Minor** \_\_\_\_\_ **Age of Minor (under 18 years old)** \_\_\_\_\_