## APPLICATION FORM – CLINTON RIVER RIDERS BICYCLE CLUB

<ul> <li>\$25 Individual (over 18)</li> <li>\$35 Family</li> <li>Name</li> <li>Address</li> </ul>	conditions to be unsafe, I will immediately disc participation in the Activity.	lified to participate in ctivity will be n to the public during veling are to be t any time, I believe	
AddressCityStateZip Phone () Email Birthday (month/day) Additional Family Members	2. FULLY UNDERSTAND that (a) BICYCLING INVOLVE RISKS AND DANGERS OF SERIOU INCLUDING PERMANENT DISABILITY, PAR DEATH ("RISKS"); (b) these Risks and danger my own actions or inactions, the actions or ina participating in the Activity, the conditions in wi takes place, or THE NEGLIGENCE OF THE "F NAMED BELOW; (c) there may be OTHER RI ANDE DECOMING to 2005 participating in	US BODILY INJURY, ALYSIS AND rs may be caused by ctions of others hich the Activity RELEASEES" SKS AND SOCIAL o me or not readily T AND ASSUME ALL DR LOSSES,	
Name & Email Birthday	<ul> <li>3. HEREBY RELEASE, DISCHARGE, AND CO SUE the Club, the LMB, their respective admir agents, officers, members, volunteers, and em participants, any sponsors, advertisers, and, if and lessors of premises on which the Activity t considered one of the "RELEASEES" herein) F LIABILITY, CLAIMS, DEMANDS, LOSSES, OF MY ACCOUNT CAUSED OR ALLEGED TO B WHOLE OR IN PART BY THE NEGLIGENCE "RELEASEES" OR OTHERWISE, INCLUDING RESCUE OPERATIONS. And, I FURTHER AG this RELEASE AND WAIVER OF LIABILITY, A RISK, AND INDEMNITY AGREEMENT I, or ar makes a claim against any of the Releasees, I SAVE, AND HOLD HARMLESS EACH OF TH any litigation expenses, attorney fees, loss, lial cost which any may incur as the result of such</li> <li>I HAVE READ AND UNDERSTAND THE TER AGREEMENT, UNDERSTAND THAT I AM GI</li> </ul>	histrators, directors, apployees, other applicable, owners akes place, (each FROM ALL R DAMAGES ON E CAUSED IN OF THE S NEGLIGENT GREE that if, despite ASSUMPTION OF hyone on my behalf, WILL INDEMNIFY, IE RELEASEES from bility, damage, or claim.	
□ New Member □ Re □ Yes, please add me to your list of active vol	SUBSTANTIAL RIGHTS BY SUBMITTING TH ASSOCIATED AGREEMENT, HAVE SUBMIT VOLUNTARILY AND WITHOUT ANY INDUCE ASSURANCE OF ANY NATURE AND INTENI COMPLETE AND UNCONDITIONAL RELEAS	AGREEMENT, UNDERSTAND THAT TAM GIVING UP SUBSTANTIAL RIGHTS BY SUBMITTING THIS FORM WITH ASSOCIATED AGREEMENT, HAVE SUBMITTED IT VOLUNTARILY AND WITHOUT 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. I	
Please make check payable and mail to: Clinton River Riders Bicycle Club PO Box 1029	AGREE THAT IF ANY PORTION OF THIS AG TO BE INVALID, THE BALANCE, NOTWITHS CONTINUE IN FULL FORCE AND EFFECT.	REEMENT IS HELD	
	Signature	Date	
RELEASE AND WAIVER OF LIABILITY, ASSUMPT RISK, AND INDEMNITY AGREEMENT ("AGREEME		Date	
IN CONSIDERATION of being permitted to participa way in The Clinton River Riders Bicycle Club ("Club" Bicycling Activities ("Activity"), I for myself, my perso representatives, assigns, heirs, and next of kin:	onsored <u>Cignoture</u>	Date SIGN	