

# MEMBERSHIP APPLICATION

## UNION VELO CLUB

77 Pleasant Street  
 Attleboro, MA 02703  
 508-226-4726  
 www.unionvelo.org



<b>NAME:</b>		
<b>ADDRESS:</b>		
<b>CITY:</b>	<b>STATE:</b>	<b>ZIP:</b>
<b>HOME PHONE:</b>	<b>E-MAIL:</b>	
<b>WORK PHONE:</b>	<b>OTHER E-MAIL:</b>	
<b>MOBILE PHONE:</b>	<b>PLEASE CIRCLE PREFERRED METHOD OF CONTACT</b>	

### CYCLING INTERESTS:

#### ROAD

- Recreation Riding Only  
 Serious Training  
 Racing - Category \_\_\_\_\_

#### MOUNTAIN

- Recreation Riding Only  
 Serious Training  
 Racing - Category \_\_\_\_\_

#### CYCLOCROSS

- Recreation Riding Only  
 Serious Training  
 Racing - Category \_\_\_\_\_

### CLUB SUPPORT:

Please CIRCLE areas in which you are willing to assist the club.

- Committee Member    Event Organization    Race Day Assistance    Other**

### Agreement and Release of Liability (Please read carefully and sign below)

I fully realize the dangers of participating in a bicycle ride and fully assume the risks associated with such participation including, by example of, and not limitation, the following: the dangers of collision with pedestrians, vehicles, other riders, and fixed or moving objects; the dangers arising from surface hazards, equipment failure, inadequate safety equipment, and weather conditions; and the possibility of serious physical and/or mental trauma or injury associated with cycling.

I, the undersigned, agree for myself, my minor children and our heirs, executors, administrators, legal representatives, assignees and successors in interest, to release and hold harmless Union Velo Cycling Club and any of its officers, representatives and agents, and any other group person or persons associated with the conducting of its events in any way whatsoever, from and against blame or liability, however caused. Including any or all claims arising out of the conduct, management, or negligence of the aforementioned, for any injury, misadventure, harm, loss, inconvenience, or damage suffered or sustained as a result of participation in its events excepting however to the extent of the insurance coverage, any liability which is covered by any valid policy of insurance. I have read the foregoing carefully and understand its content and sign as my own free act.

I shall abide by all traffic laws and practice courtesy and safety in cycling. I understand helmets are required to avoid serious head injury and give my assurance that I will wear a suitable helmet on all rides.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Required if under 18)

Make Checks payable to Union Velo Cycling Club  
 Paid: \_\_\_\_\_

Dues (valid for each calendar year) are \$30  
 Jersey Size: \_\_\_\_\_  
 Shorts Size: \_\_\_\_\_