

2015 Team Bicycles, Inc. Membership Application and Liability Waiver

A United States Cycling Federation Affiliated Bicycle Racing Club

Type* New Renewal Transfer from other USCF Team

Name _____ (please print)

Address _____

City State Zip _____

Phone (preferred) _____ - _____ - _____ Type Cell Home Work

Birth Date _____/_____/_____ USCF License Number: _____ (not required)

Email _____

Emergency Contact Info (must provide a name and at least one contact phone number):

Name _____

Phone (preferred) _____ - _____ - _____ Type Cell Home Work

Phone (secondary) _____ - _____ - _____ Type Cell Home Work

Clothing sizes (please list child size, or circle adult size):

	XS	S	M	L	XL	2XL	3XL
Bibs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jersey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skinsuit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Interests, please indicate levels, where appropriate (Check as many as desired)

Road Racing	<input type="checkbox"/> ___	Time Trials	<input type="checkbox"/> ___	criteriums	<input type="checkbox"/> ___
Mountain Bike Racing	<input type="checkbox"/> ___	Cyclocross	<input type="checkbox"/> ___	Track Racing	<input type="checkbox"/> ___
Rallies/Charity Rides	<input type="checkbox"/>	Triathlons	<input type="checkbox"/>	Officiating	<input type="checkbox"/>
Dedicated Race Team	<input type="checkbox"/>				

*If renewal, please review your listing on the membership roster (.pdf) on the TBi forum. Then, please note any information that has changed with an N beside the info. If there are no changes, then all that is required is to print and sign your name, where appropriate in the Assumption of Risk and Indemnity Agreement ("Agreement") section.

New membership price is \$100 per year (includes team jersey, and if joining after September 1st, member is credited for next year's membership fee.) Renewal after first year is \$50, and does not include a jersey. Jerseys are available at current team price.

Assumption of Risk and Indemnity Agreement ("Agreement")

Please read the following carefully and with serious regard to what you are consenting to, then printing and/or signing your legal name where requested.

IN CONSIDERATION of my application for membership with Team Bicycles, Inc. (TBi), or being permitted to participate in any way with TBi, ("Club") sponsored Bicycling Activities ("Activity") I, _____ (print name) for myself, my personal representatives, assigns, 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 the hazards of travelling 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; and that I will wear an ANSI- or SNELL-approved helmet while riding my bicycle 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 condition 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 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, 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 “RELEASEES” 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 “RELEASEES” OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; 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 RELEASEES 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, AND 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 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.

Signature of Entrant _____ Printed Name _____ Date _____

I ATTEST THAT I AM EIGHTEEN (18) YEARS OF AGE OR (OR THAT IF I AM YOUNGER , MY PARENTS OR LEGAL GUARDIAN HAVE EXECUTED THIS WAIVER BELOW), AND THAT I AM PHYSICALLY FIT AND SUFFICIENTLY TRAINED TO PARTICIPATE IN ALL ACTIVITIES ASSOCIATED WITH THE PROGRAM OR EVENTS AND MY PARTICIPATION IN SUCH PROGRAM OR EVENTS IS VOLUNTARY.

CONSENT AND RELEASE OF PARENT OR GUARDIAN

I am the parent or *guardian* of _____ (Child).

My Child is fit for BICYCLING ACTIVITIES, and I consent to my Child’s participation. I HAVE READ AND I UNDERSTAND THE ABOVE CONTRACT. In consideration of allowing my Child to participate, I consent to the contract and agree that ITS TERMS SHALL LIKEWISE BIND.

ME, MY CHILD, and our heirs, legal representatives, and assignees. I HEREBY RELEASE AND SHALL DEFEND, INDEMNIFY AND HOLD HARMLESS THE RELEASEES FROM EVERY CLAIM AND ANY LIABILITY that I or my Child may allege against the Releasees (including reasonable legal fees and costs) as a direct or indirect result of injury or death to me or my Child because of my Child’s participation in the event, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERS TO THE MAXIMUM EXTENT PERMITTED BY LAW. I PROMISE NOT TO SUE RELEASEES on my behalf or on behalf of my Child regarding any claim arising from my Child’s participation in the event.

Parent or Guardian Printed Name _____ Signature _____ Date _____

Dues paid via: Cash PayPal BikeReg Check enclosed (Do not Mail Cash)

Please mail the completed form (and payment by check, if applicable) to:
Team Bicycles, Inc., 143 East Harwood Road, Hurst, TX 76054, United States (PayPal Email:teambikesinc@gmail.com)