

# GOLDEN GATE CYCLISTS MEMBERSHIP APPLICATION AND ANNUAL RENEWAL

## MEMBER RELEASE

In consideration of acceptance of my application for membership in Golden Gate Cyclists I do hereby for myself, heirs and assigns waive and release any rights and claims for damages which I may have against Golden Gate Cyclists for any injuries I may suffer at any club function. I understand that no Golden Gate Cyclists property, including the club name, logo, calendar, roster, newsletter, member's name/address/phone numbers may be used without permission. My signature below verifies that I am over the age of 21, agree to all the conditions set forth in this release, and that the Golden Gate Cyclists has the right to deny or rescind my membership should I not abide by these tenets. I understand that helmets are required.

X \_\_\_\_\_ X \_\_\_\_\_  
 Signature Signature Family Member Date  
 LEAGUE OF AMERICAN WHEELMEN D/B/A 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 Golden Gate Cyclists ("Club") sponsored Bicycling Activities ("Activity") I 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 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 danger 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, the **LAB**, their respective administrators, directors, agents, officers, members, 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. 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 **releasees, 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, 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 invalid the balance, notwithstanding, shall continue in full force and effect.**

X \_\_\_\_\_ X \_\_\_\_\_  
 Signature Signature Family Member Date  
 Printed first name Last name  
 Street address Apartment  
 City State Zip  
 Phone number Birthdate (MM/DD)  
 Email address - Monthly Newsletters will be sent by email only

- |   |
|---|
| <input type="checkbox"/> Male<br><input type="checkbox"/> Female<br><input type="checkbox"/> New member<br><input type="checkbox"/> Renewing member |
| <input type="checkbox"/> Do not list phone in Club Roster.<br><input type="checkbox"/> Do not list email in Club roster or on-line directory.       |

How did you hear about us?  
 Friend  Web Site  Bike Shop  Club Event  Other Clubs  Other  
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**Mail application and \$20 (\$23 for Family Membership, 2 members, one email address) check or money order payable to: Golden Gate Cyclists, P.O. Box 656, Kentfield, CA 94914**

**PLEASE SIGN THE MEMBER RELEASE AND LIABILITY AGREEMENT. APPLICATION CANNOT BE PROCESSED WITHOUT BOTH SIGNATURES!!!**

I have a:  Mountain bike,  Road bike  
 I am interested in:  Leading mountain rides,  Going for rides during the week (daytime)  
 Leading road rides,  Helping with parties.

**HELMET AND GLOVES ARE REQUIRED ON ALL RIDES.**