## **Membership Form**



## JOIN ONLINE or learn more at: www.cherrycapitalcyclingclub.org

1 yr -\$25	Membership Type (Select one)								
under the age of 21, living at home. Family membership includes two ogin IDs with individual passwords for two adult family members.    1 yr -\$35	Individual – For one person who is at least 18 years of age. Includes one login ID with password.					_	☐2 yr -\$45	□3 yr -\$65	
Estreet Address  City, State, ZIP  Home Phone  Cell Phone  Cell Phone  E-Mail Address  Spouse First Name  Spouse First Name  Spouse First Name  Contacts phone  Riding Interests (Select all that apply)  Road  Mountain / Fat-tire Biking  Commuting  Touring  Fixed Gear  Weekend Trips  Volunteering Interests (Select all that apply)  Board  Leelanau Harvest Tour  Ride Around Torch  Ride Leader – Mountain Bike  Ride Leader - Road  Club Picnic  Web Site  Safety & Education  RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDERNITY AGREEMENT ("Agreement") for LEAGUE OF AMERICAN WHEELANA ("I) I LEAGUE OF AMERICAN HEELANA ("I) I LEAGUE OF AMERIC	under the age of 21, I		•	ີ່ 2 yr <b>-</b> \$65	□3 yr -\$95				
Cell Phone  Contacts phone  Contacts phone  Contacts phone  Contacts phone  Contacts phone  Riding Interests (Select all that apply)  Road  Mountain / Fat-tire Biking  Commuting  Touring  Fixed Gear  Weekend Trips  Volunteering Interests (Select all that apply)  Board  Leelanau Harvest Tour  Ride Around Torch  Ride Leader – Mountain Bike  Ride Leader - Road  Club Picnic  Web Site  Safety & Education  RILEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDENNITY AGREEMENT ("Agreement") for LEAGUE OF AMERICAN MINELAND ("Libra") in NORNISDEATION of being permitted to participate in any way in Cherry Capital Cycling (Libr ("Club") sponsored Bicycling Activities ("Activity") I, for myself, my personal representatives, assigns, heirs and next of kin:  ACKNOWLEGOE, agree, and represent that Lunderstand the nature of Bicycling Activities and that 1 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 health of the hazards of traveling are to be expected. I further agree and warrant that lif, at any time, I believe conditions to be unsafe, will immediately discontinue further participation in the Activity, will be conducted over public roads and facilities open to the public during healthy discontinue further participation in the Activity. Will be conducted over public roads and facilities open to the public during healthy discontinue further participation in the Activity. Will be conducted over public roads and facilities open to the public during healthy discontinue further participation in the Activity. Cell Properties of the public during healthy discontinue further participation in the Activity. Cell Properties of the participation in the Activity will be conducted over public roads and facilities open to the public during healthy in the Activity	Contact Information								
Cell Phone  Cell P	First Name			Last Name					
Cell Phone	Street Address								
Emergency Contact    Contacts phone	City, State, ZIP								
Riding Interests (Select all that apply)  Road	Home Phone			Cell Phone					
Riding Interests (Select all that apply)  Road Mountain / Fat-tire Biking Commuting Touring Fixed Gear Weekend Trips  Volunteering Interests (Select all that apply)  Board Leelanau Harvest Tour Ride Around Torch Ride Leader – Mountain Bike Ride Leader - Road Club Picnic  Web Site Safety & Education  RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("Agreement") for LEAGUE OF AMERICAN MHEELMAN d/b/a LEAGUE OF AMERICAN BICYCLISTS ("LAB") IN CONSIDERATION of being permitted to participate in any way in Cherry Capital Cycling Club ("Club") sponsored Bicycling Activities ("Activity") I, for myself, my personal representatives, assigns, heirs and next of kin: L. ACKNOWLEDGE, agree, and represent that I understand the nature of Bicycling Activities and Activities and the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, will immediately discontinue further participation in the Activity, E. FULLY UNDERSTAND that:  BY EVILLY UNDERSTAND THAN ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING VIRAL INFECTIONS,  BACTERIAL INFECTIONS AND OTHER COMMUNICABLE DISEASES AND ILLNESSES, PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these slikes and dangers may be caused by my own actions, or inactions or others participating in the Activity, the condition in which the scrivity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND BALI RESPONSIBILITY FOR  BY EVILLY BY EVILLA SELECTIONS, AND CONTENTS AND SOCIAL AND ECONOMIC LOSSES  BY EVILLA SELECTIONS, AND DANGERS Incur as a result of my participation in the Activity.  BY EVILLA SELECTIONS, AND SOCIAL AND ECONOMIC LOSSES  BY EVILLA	E-Mail Address								
Riding Interests (Select all that apply)  Road	Spouse First Name			Spouse Last Nan	пе				
Road Mountain / Fat-tire Biking Commuting Touring Fixed Gear Weekend Trips  Volunteering Interests (Select all that apply)  Board Leelanau Harvest Tour Ride Around Torch Ride Leader – Mountain Bike Ride Leader - Road Club Picnic  Web Site Safety & Education  RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("Agreement") for LEAGUE OF AMERICAN WHEELMAN d/b/a LEAGUE OF AMERICAN BICYCLISTS ("LAB") IN CONSIDERATION of being permitted to participate in any way in Cherry Capital Cycling Club ("Club") sponsored Bicycling Activities ("Activity") 1, for myself, my personal representatives, assigns, heirs and next of kin: 1. ACKNOWLEDGE, agree, and represent that 1 understand the nature of Bicycling Activities and that 1 am qualified, in good health, and in proper physical condition to participate in such Activity. 1 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 traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, will immediately discontinue further participation in the Activity. 2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLIDING VIRAL INFECTIONS, BACTERIAL INFECTIONS AND OTHER COMMUNICABLE DISEASES AND ILLNESSES, PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these sliks 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 bactivity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND DALA AND ECONNOMIC LOSSES sither not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL AND ECONNOMIC LOSSES sither not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL AND ECONNOMIC LOSSES sither not known to me or not	Emergency Contact				Contac	cts phone			
Touring Fixed Gear Weekend Trips    Fixed Gear Weekend Trips	Riding Interests (S	Select all that apply)							
Board Leelanau Harvest Tour Ride Around Torch Ride Leader – Mountain Bike Ride Leader - Road Club Picnic  Web Site Safety & Education  RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("Agreement") for LEAGUE OF AMERICAN MHEELMAN d/b/a LEAGUE OF AMERICAN BICYCLISTS ("LAB") IN CONSIDERATION of being permitted to participate in any way in Cherry Capital Cycling ("Club") sponsored Bicycling Activities ("Activity") I, for myself, my personal representatives, assigns, heirs and next of kin:  L. 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 he Activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, will immediately discontinue further participation in the Activity.  E. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING VIRAL INFECTIONS, BACTERIAL INFECTIONS AND OTHER COMMUNICABLE DISEASES AND ILLNESSES, PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these kisks and dangers may be caused by my own actions, or inactions, or inactions or inactions or others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELIOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES (COSTS, AND DAMAGES I incur as a result of my participation in the Activity.  B. HERBEY 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, or THE RELEASEES herein) FROM ALL LIABILITY, CLAIMS	Road		Mountain	/ Fat-tire Biking		Com	muting		
Board Leader – Mountain Bike Ride Leader - Road Club Picnic  Web Site Safety & Education  RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("Agreement") for LEAGUE OF AMERICAN WHEELMAN d/b/a LEAGUE OF AMERICAN BICYCLISTS ("LAB") IN CONSIDERATION of being permitted to participate in any way in Cherry Capital Cycling Club ("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 rondition 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 traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, will immediately discontinue further participation in the Activity.  2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING VIRAL INFECTIONS, BACTERIAL INFECTIONS AND OTHER COMMUNICABLE DISEASES AND ILLNESSES, PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these Ractivity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC 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, rolunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, of the maching participation in the Activity.  3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Club, the LAB, their respective administrators, directors, agents, officers, members, rolunteers, and employees, other participants, any sponsor	Touring		Fixed Ge	ar		Wee	kend Trips		
RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("Agreement") for LEAGUE OF AMERICAN WHEELMAN d/b/a LEAGUE OF AMERICAN BICYCLISTS ("LAB") IN CONSIDERATION of being permitted to participate in any way in Cherry Capital Cycling Club ("Club") sponsored Bicycling Activities ("Activity") I, for myself, my personal representatives, assigns, heirs and next of kin:  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 traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, will immediately discontinue further participation in the Activity.  FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING VIRAL INFECTIONS, BACTERIAL INFECTIONS AND OTHER COMMUNICABLE DISEASES AND ILLINESSES, 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 column and and provided the activity and 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 RESC	Volunteering Inter	rests (Select all that	apply)						
Web SiteSafety & Education  RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("Agreement") for LEAGUE OF AMERICAN WHEELMAN d/b/a LEAGUE OF AMERICAN BICYCLISTS ("LAB") IN CONSIDERATION of being permitted to participate in any way in Cherry Capital Cycling Club ("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 the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, will immediately discontinue further participation in the Activity.  2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING VIRAL INFECTIONS, BACTERIAL INFECTIONS AND OTHER COMMUNICABLE DISEASES AND ILLNESSES, PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these kisks 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 bether not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR OSSES, 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	Board		Leelanau	Harvest Tour		Ride	Around Tor	ch	
RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("Agreement") for LEAGUE OF AMERICAN WHEELMAN d/b/a LEAGUE OF AMERICAN BICYCLISTS ("LAB") IN CONSIDERATION of being permitted to participate in any way in Cherry Capital Cycling Club ("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 the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, will immediately discontinue further participation in the Activity.  2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING VIRAL INFECTIONS, BACTERIAL INFECTIONS AND OTHER COMMUNICABLE DISEASES AND ILLNESSES, PERMANENT DISABILITY, PARALYSIS AND DEATH ("RISKS"); (b) these 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 OSSES, 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 "REL	Ride Leader – M	ountain Bike	Ride Lea	der - Road		Club	Picnic		
WHEELMAN d/b/a LEAGUE OF AMERICAN BICYCLISTS ("LAB") IN CONSIDERATION of being permitted to participate in any way in Cherry Capital Cycling Club ("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 the hazards of traveling are to be expected. I further agree and warrant that if, at any time, I believe conditions to be unsafe, will immediately discontinue further participation in the Activity.  2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING VIRAL INFECTIONS, BACTERIAL INFECTIONS AND OTHER COMMUNICABLE DISEASES AND ILLNESSES, 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 COSES, 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 olace, (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 WH	Web Site		Safety &	Education					
AM 18 YEARS OF AGE OR OLDER, HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING THIS AGREEMENT, HAVE SIGNED 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 AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.									
	X - Sign here to accept waiver								
X - Sign here to accept waiver	Mailing Address								
V. Ciam have to account well-on									
•	walling Address								

Send application and check to: Cherry Capital Cycling Club, Treasurer

P.O. Box 1807

Traverse City, MI 49685-1807