



BAY VIEW BICYCLE CLUB, INC

MEMBERSHIP APPLICATION



Name:		Phone: ()
Name 2 (for Household memberships only):		Phone: ()
Other members (for Household memberships only):		
Address:		
City:	State:	ZIP Code:
Email:	Newsletters are emailed to members. Email addresses are not made public. Check box if you DO NOT wish to be included in the club roster <input type="checkbox"/>	
Email 2:		

New Member **Renewal** **Annual Dues (April 1 - March 31):** Individual (\$25.00) Household (\$40.00)

If remitting via check, make payable to and mail to: Bay View Bicycle Club, P.O. Box 070455, Milwaukee, WI 53207

LEAGUE OF AMERICAN WHEELMEN d/b/a LEAGUE OF AMERICAN BICYCLISTS ("LAB") AND BAY VIEW BICYCLE CLUB, INC RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT ("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in Bay View Bicycle Club ("Club") sponsored Cycling 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 Cycling Activities and that I am qualified, in good health, 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, 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 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, 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; 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.
4. I authorize the Club, its representatives and/or members the right to take photographs and/or video of me or my property in connection with the Club's activities. I further authorize the Club or its members to use and publish same in print and/or electronic form. I agree that the Club may use such photographs and/or video of me with or without my name and for any lawful purpose.

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 to be invalid the balance, notwithstanding, shall continue in full force and effect.

Electronic Signature Agreement. If submitting this Application on our web site, by entering your name below, you are signing this Application electronically. You agree your electronic signature is the legal equivalent of your manual signature and you consent to be legally bound by this Application's terms and conditions.

PARTICIPANT'S SIGNATURE (if age 18 or over): _____ Date: _____

SPOUSE/PARTNER SIGNATURE (if Household membership): _____ Date: _____

MINORS (if participant is under age 18):

And I, the minor's parent and/or legal guardian, understand the nature of bicycling activities and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I hereby release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless each of the releasees from all liability, claims, demands, losses, or damages on the minors 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 further agree that if, despite this release, I, the minor, or anyone on the minor's behalf makes a claim against any of the releasees named above, I will indemnify, save, and hold harmless each of the releasees from any litigation expenses, attorney fees, loss, liability, damage, or cost any may incur as the result of any such claim.

Electronic Signature Agreement. If submitting this Application on our web site, by entering your name below, you are signing this Application electronically. You agree your electronic signature is the legal equivalent of your manual signature and you consent to be legally bound by this Application's terms and conditions.

PRINTED NAME OF PARENT/GUARDIAN: _____

PARENT/GUARDIAN SIGNATURE (for MINORS): _____ Date: _____