



Chinook Cycling Club

Tri-Cities, WA

www.chinookcyclingclub.com



2017 CHINOOK CYCLING CLUB MEMBERSHIP APPLICATION (calendar year membership period)

Name: _____

Please list all names included in family membership: _____

Address: _____

City, St., Zip: _____

Phone: _____ E-mail: _____

Chinook Cycling Club does not share any of the above information outside the club.

To receive e-mail notices of club news, activities, and events: Log onto the club webpage and create an account with user name and password.

Interest(s): - MTB - Road – Cyclo-cross: Racing - Touring - Other _____

Membership Options: (check only one, make checks payable to: Chinook Cycling Club)

_____ INDIVIDUAL MEMBERSHIP - \$45.00

_____ FAMILY MEMBERSHIP - \$60.00 (For immediate family, including children under the age of 21 years)

_____ INDIVIDUAL YOUTH MEMBERSHIP - \$15.00 (For young riders, 17 years old or younger as of December 31, 2017)

_____ ONE DAY MEMBERSHIP - \$15.00 (If an additional 1 day membership is needed, the cost will be the balance of full membership price. This entitles the new member to full membership privileges for the remainder of the calendar year.)

Note: Participation in all 2017 Chinook Cycling Club Events: Spring Road Series, Time Trial Series, and Fall Mountain Bike Series are included in membership. Chinook Cycling Club membership fee does not include USA CYCLING membership fees.

I agree to wear an ANSI and or SNELL approved helmet when participating in any club cycling activity.

Signature: _____ Date: _____

Form prints onto an 8.5" x 11" sheet of paper. Please print and fill out the 2017 Waiver and Release of Liability for each member and attach with this form. Make checks payable to: "Chinook Cycling Club", and mail to:

**Chinook Cycling Club
2120 Hamilton Ave
Richland, WA 99354**

CHINOOK CYCLING CLUB, INC.
2017 WAIVER AND RELEASE OF LIABILITY – READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the **CHINOOK CYCLING CLUB, INC.** program, its related events and activities, I _____, the undersigned, acknowledge, appreciate, and agree that: (Print Name)

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS**, both known and unknown, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES** or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Company immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE CHINOOK CYCLING CLUB, INC.**, and USA Cycling, Inc., their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for this activity ("Releasees"), **WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH**, or loss or damage to person or property associated with my presence or participation, **WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE**, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____ Age: _____ Date Signed: _____
PARTICIPANT'S SIGNATURE

Emergency Contact: NAME _____ PHONE _____

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES**, to the fullest extent permitted by law.

X _____ Date Signed: _____
PARENT/GUARDIAN'S SIGNATURE (print name)