

**Ciclistas del Valle Cycling Club  
Membership Application and Release Form 2017-2018**

(Separate form for each member)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Contact Phone: \_\_\_\_\_

USAC Cycling License #: \_\_\_\_\_ USAT License #: \_\_\_\_\_

**TYPE OF RACING:** (check all that apply) \_\_\_ Road (cat\_\_\_) \_\_\_ Cyclocross (cat\_\_\_) \_\_\_ MTB (cat\_\_\_) \_\_\_ TRI

**RACING AGE GROUP:** \_\_\_ Junior \_\_\_ Elite \_\_\_ M35+ \_\_\_ M45+ \_\_\_ M55+

**HOW LONG HAVE YOU BEEN RACING?** \_\_\_ Years \_\_\_ I'm new to racing

**TYPE OF RIDING YOU PARTICIPATE IN:** \_\_\_ Road, \_\_\_ Cyclocross, \_\_\_ MTB

**WERE YOU REFERRED BY A CURRENT MEMBER?** \_\_\_ No \_\_\_ Yes (List Name) \_\_\_\_\_

Annual Membership Dues: \$190.00 adult (18+), \$180.00 junior \$ \_\_\_\_\_

Credit for previous year volunteer requirement: (-\$40) \$ \_\_\_\_\_

Credit from current member account balance (subtract from subtotal) \$ \_\_\_\_\_

Total due with application \$ \_\_\_\_\_

<input type="checkbox"/> Cash
<input type="checkbox"/> Check # _____
<input type="checkbox"/> Returning Member Account Balance

*Annual membership dues include the cost of 1 club apparel kit (jersey and shorts/bib or Tri suit) Additional kits and other clothing can be ordered separately.*

**Send completed form(s) with payment to Ciclistas del Valle Cycling Club, PO Box 744, Modesto, CA 95353-0744**

**WAIVER AND RELEASE OF LIABILITY**

In consideration of being allowed to participate in any way with **Ciclistas del Valle Cycling Club, Inc.** and its related events and activities, I, \_\_\_\_\_, the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and 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 **Ciclistas del Valle Cycling Club, Inc.**, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for the 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.



**PHOTOGRAPHY CONSENT AND RELEASE**

In consideration of acceptance of my application for membership in **Ciclistas del Valle Cycling Club, Inc.** ("CdV"), I, \_\_\_\_\_, the undersigned, hereby authorize CdV and its sponsors to photograph/film me at any time while wearing team clothing. I further authorize CdV and its sponsors to use or permit to use and display said photograph in any publication, multimedia production, display, advertisement or world-wide-web publication, including but not limited to CdV's and its sponsors website. I also agree that CdV and its sponsors may use name, likeness, or biographical information supplied by me. I hereby release and forever discharge CdV, its sponsors and their agents,

