



Adirondack Cycling Team

Membership Application

New Member Renewal Reinstatement

First Name	Last Name	Date Of Birth
Address		
City	State	Zip
Evening Phone () -	Day Phone () -	E-Mail

Annual Dues Are: March 1st through October 31st \$15.00 Individual \$20.00 Family Make check payable to "Adirondack Cycling Team" and mail to: ADIRONDACK CYCLING TEAM 91 HAMMOND LANE PLATTSBURGH, NY 12901	Length Of Trip Preferred – (Circle any that apply) <input type="checkbox"/> 10 – 15 Miles <input type="checkbox"/> 15 – 20 Miles <input type="checkbox"/> 25 – 35 Miles <input type="checkbox"/> Ready for any Challenge
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New York Bicycling Coalition ("NYBC") and Adirondack Cycling Team ("ACT") Release and Waiver Of Liability, Assumption Of Risk and Indemnity ("Agreement")

IN CONSIDERATION of being permitted to participate in any way in Adirondack Cycling Team (ACT) 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 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.
- 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 inaction's, the actions or inaction's 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 RISKS AND ALL RESPONSIBILITIES FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity.
- HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO IDEMNIFY AND SAVE AND HOLD HARMLESS the Adirondack Cycling Team, the New York Bicycling Coalition, their respective administrators, directors, agents, and employees, other participants, and sponsors, advertisers, and, if applicable, owners and leasers of premises on which the Activity take 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 NEGLEGENT RESCUE OPERATIONS.

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 the agreement is held to be invalid the balance, not withstanding, shall continue in force and effect. (1-1996)

PARTICIPANTS SIGNATURE: _____ DATE: _____

IF PARTICIPANT IS UNDER 16.....The child will be sponsored and accompanied by a parent and/or legal guardian and I, the minor, parent and/or legal guardian, understand the nature of bicycling activities and the minor's experience and capabilities and I believe the minor to be qualified 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 minor's 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 names above, I will indemnify, save and hold harm-less each of the releasees from any litigation expenses, attorney fees, loss liability, damages or cost any may incur as the result of any such claim.

PARENT / GUARDIAN SIGNATURE: _____ DATE: _____