Please complete and sign the enclosed application, enclose your check by taping this brochure on three sides, apply the appropriate postage and place in the mail using this self-addressed brochure.

Now Available

This application can be downloaded and payment made by credit card from our website at http://www.hancockhandlebars.org/membership.html

Additional instructions will be found on the website.

The Hancock Handlebars Bicycle Club
Findlay, Ohio 45839

Membership Application

www.hancockhandlebars.org

2020 Membership Application for 2020
(All Dues Received between September 1st, 2019 and August 31st, 2020)
Application for (Year) 20____New ___ Renewal____ Club Membership Dues (Please mark one)
  ___ Single $10.00
  ___ Family $15.00
  ___ LAB/AYH Lifetime Membership (No Charge)

Name: ______________________________________  Address: ____________________________________
City: ______________  State: _____  Zip: __________
Phone: ______________  Home___Work___Cell __
Birth Date:______________
E-Mail: ________________

Participant’s Signature (If over 18) Parent’s Signature (If under 18)
____________________________________ Date   ______________

Name and birth date of others in Family Membership

1. __________________________  BD ______________
   Email If Different ________________________________

2. __________________________  BD ______________
   Email If Different ________________________________

3. __________________________  BD ______________
   Email If Different ________________________________

4. __________________________  BD ______________
   Email If Different ________________________________

Bicycle Club Affiliations:
LAB /AYH Life Membership #: __________________________

The annual Hancock Horizontal Hundred Tour, held each September, is the primary fundraising event for the Club. I will volunteer a portion of my time to ensure the success of the event. Yes _____ No _____

Bicycle riding on lightly traveled roads is fairly safe. But there is some degree of hazard, so we must have the following release:

WAIVER AND RELEASE OF LIABILITY -- READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the Hancock Handlebars Bicycle Club program, its related events and activities, I, __________________________ (name of participant), 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 Hancock Handlebars Bicycle Club 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 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. 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.

Signed: _________________________________  Age: ________________________
Date Signed: ____________________________

PARTICIPANT’S SIGNATURE FOR PARENT / LEGAL GUARDIAN OF PARTICIPANTS OF MINORITY AGE

This is to certify that I, as parent/legal 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.

Name(s) of Minor Participants:
________________________________________  ____________________________
________________________________________  ____________________________

Date: _____________________  Signed: _________________________________  PARENT/LEGAL GUARDIAN SIGNATURE
_______________________________________  (Print Name)