

**Lake Oroville Bicyclists Organization  
Membership Form**



**Purpose:**

- We are an organization dedicated to promoting the benefits of bicycling in the Oroville area.
- We are involved in bicycling advocacy at all levels in the community.
- We are an organized group that gets together to ride both road and mountain biking.

*Membership Fees:* Individual \$15/year or Family, \$25/year. Please make checks payable to: Lake Oroville Bicyclists Organization.

Mail payment & membership form to: Lake Oroville Bicyclists Organization, 7 Hope Lane, Oroville, CA 95966.

- Please provide your name, address and e-mail so that we can keep you informed and let you know about our planned events and rides.
- We are currently using e-mail for all correspondence, [lakeorvillebicyclists@gmail.com](mailto:lakeorvillebicyclists@gmail.com)

Name: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

***Member/Participant Release of Liability***

I hereby make known that in the case of accident, injury, or damage of any kind, I will hold blameless the Lake Oroville Bicyclist Organization (LOBO), its officers, members and volunteers. I recognize that bicycling is potentially dangerous, and I am responsible for judging my own skill level and the safety of my equipment. I understand that I participate in club activities at my own risk. I further recognize that safety is my personal responsibility. I agree to hold LOBO harmless and indemnify the LOBO for all costs, judgments and awards that may be claimed, including the cost to defend such claims.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If you are under 18 years of age, your parent or guardian must sign waiver below.*

***Parent Guardian Waiver for Minors (under 18 years old)***

The undersigned parent and natural guardian or legal guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parent or legal guardian.

Print Name: \_\_\_\_\_ Age: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Family Membership***

Print Name: \_\_\_\_\_ Age: \_\_\_\_\_

Print Name: \_\_\_\_\_ Age: \_\_\_\_\_

Print Name: \_\_\_\_\_ Age: \_\_\_\_\_

Print Name: \_\_\_\_\_ Age: \_\_\_\_\_

Print Name: \_\_\_\_\_ Age: \_\_\_\_\_