ONONDAGA CYCLING CLUB, INC. 2020 MEMBERSHIP FORM
Membership valid January 1 to December 31, 2020

Check only ONE Membership Category  Make checks payable to: Onondaga Cycling Club, Inc.

- Single $25.00  - Family $35.00  - Individual Youth $5.00  - Contributing $10.00 (non-rider)

FULL NAME* ___________________________________________________________ M □ F* □ BIRTHDAY ___/___/____

ADDRESS* ______________________________________________________ APT PHONE* (_____ ) ________

CITY* ____________________________ STATE* ______ ZIP CODE* __________________ - ______

E-MAIL* ________________________________

EMERGENCY CONTACT* __________________________________________ PHONE* (_____ ) __________________

FAMILY MEMBERSHIPS* (all living in same household)  E-Mail

NAME: __________________________________________ M □ F* □ BIRTHDAY ___/___/____

NAME: __________________________________________ M □ F* □ BIRTHDAY ___/___/____

NAME: __________________________________________ M □ F* □ BIRTHDAY ___/___/____

NAME: __________________________________________ M □ F* □ BIRTHDAY ___/___/____

*Required fields; these must be completed for application to be processed

Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement ("Agreement"):

In consideration for being permitted to be a member of Onondaga Cycling Club, Inc. ("Club") and to participate in any way in any Onondaga Cycling Club, Inc. sponsored Activities ("Activity"), I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. 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.

2. 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 inactions, the actions or inactions 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 SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Club, its administrators, directors, ride leaders, volunteers, agents, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lesasers 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 NEGLIGENCE 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 THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Participant #1 Signature*_____________________________ Printed Name* ____________________________ DATE*__________

Participant #2 Signature*_____________________________ Printed Name* ____________________________ DATE*__________

Participant #3 Signature*_____________________________ Printed Name* ____________________________ DATE*__________

Participant #4 Signature*_____________________________ Printed Name* ____________________________ DATE*__________

Participant #5 Signature*_____________________________ Printed Name* ____________________________ DATE*__________
MINOR RELEASE  (must be completed for participants under the age of 18)

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF BICYCLING ACTIVITIES
AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD
HEALTH, AND IN PROPER PHYSICAL CONDITION 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 NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM
ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE
RESULT OF ANY SUCH CLAIM.

Parent/Guardian Printed Name: ____________________________
Parent/Guardian Signature: ____________________________
Date: ____________________________

ONONDAGA CYCLING CLUB, INC.
P O BOX 6307 - TEALL STATION
SYRACUSE NY 13217-6307