



Summit Cycling Club

Petition for Membership Application

PLEASE PRINT LEGIBLY

NAME	FIRST / MIDDLE INITIAL / LAST
NAME OF SUMMIT SPONSOR	
DATE OF BIRTH	MONTH / DAY / YEAR
ADDRESS 1	STREET
CITY / STATE / ZIP	CITY / STATE / ZIP CODE
PHONE # (MOBILE)	
IN CASE OF EMERGENCY (ICE) CONTACT NAME / PHONE	
YOUR EMAIL	

Please indicate if you do not want your home address, phone number, or Email address visible to other club members in the Membership Directory by checking box:

RACING INFORMATION

<input type="checkbox"/> USCF LICENSED RACER	USCF CATEGORY _____	RACING AGE _____	YEARS RACING _____	LICENSE # _____
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CHECK ONE BOX	<input type="checkbox"/> NEW MEMBER <input type="checkbox"/> RENEWAL
MAKE CHECK PAYABLE TO:	SUMMIT CYCLING CLUB
MAIL WITH COMPLETED APPLICATION TO:	NEAL GROBMAN 62 HUXLEY CIRCLE MARLTON NJ 08053
TREASURER'S E-MAIL:	NSGB@AOL.COM

SUMMIT CYCLING CLUB WAIVER AND RELEASE OF LIABILITY – READ BEFORE SIGNING

In signing this release for myself or for named applicant if applicant is under the age of 18, I acknowledge that I understand the intent hereof, and hereby agree to absolve and hold harmless the Summit Cycling Club, Board Members and Club Members, Danzeisen and Quigley (D&Q) and any other present or future sponsors and their officers, members, and employees respectively, and any others connected with any club event in any way whatsoever, singularly and collectively from and against blame or liability for any injury, misadventure, harm, loss, inconvenience, or damage suffered or sustained as a result of participation in any and all Summit Cycling Club, Danzeisen and Quigley (D&Q) and any other present or future sponsored event, and that the Summit Cycling Club, Danzeisen and Quigley (D&Q) and any other present or future sponsors and their offices, members, and employees respectively and are not responsible for and are not insurers of my personal safety during events. I thus release them and I agree to save them harmless from any and all liability arising from my having sustained any property damage or personal injury by reason of their negligence in participating in sponsoring, planning, or arranging events. I also hereby consent to and permit emergency medical treatment in the event of injury or illness. I shall abide by traffic laws, regulations, practice safety, courtesy and safety in bicycling. I, the undersigned acknowledge and agree 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 I knowingly and freely assume all such risks both known or unknown even if arising from the negligence of the releasees or others, and I assume full responsibility for my participation. I hereby freely assume all such risks both known and unknown even if arising from the negligence of the club members, board members or others, and assume full responsibility for my participation in the club rides/activities. I have read this release of liability and assumption of risk agreement, fully understanding its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Signature _____

Date _____