

**Illinois Valley Cycling Association  
2011 Membership Application**

Please print your information in the form below and send, along with your check, to the following address:

**Brad May, 933 26th St. Peru, IL 61354**

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

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

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

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**2011 Annual Membership: \$20.00**

**2011 Family Membership: \$35.00**

(Memberships expire at the end of 2011)

**Make checks payable to: Illinois Valley Cycling Association**

I know that cycling and volunteering to work in club activities are potentially hazardous. I should not enter in club activities unless I am medically able and properly trained. I agree to abide by all club rules. I assume all risks associated with cycling and volunteering to work in club activities including but not limited to, falls, accidents, contact with other participants, the effects of the weather, the conditions of the road or traffic, conditions of trails, all such risks being know and appreciated by me. I agree to always wear a helmet while riding and to ride responsibly. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application for membership, I, for myself and anyone entitled to act on my behalf, waive and release the Illinois Valley Cycling Association and all sponsors, their representatives and successors from all claims liabilities of any kind arising out of my participation in these club activities even though liability that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_ / \_\_\_ / \_\_\_\_\_