



Central Bucks Bicycle Club Membership Application

Fill out this application form and mail to the address below
OR

Renew online (fee) via the link on club website: www.cbbikeclub.org

New Membership Renewal Address Change

Please print legibly all information below.

All adults (18 & over) must sign the waiver.

NAME: _____ Ride Category: _____

NAME: _____ Ride Category: _____

NAME: _____ Ride Category: _____

NAME: _____ Ride Category: _____

ADDRESS: _____

CITY, ST, ZIP: _____

PHONE: _____ DATE: _____

E-MAIL ADDRESS: _____

Category	Mileage	Terrain	Avg. MPH
AX	25-100	any	18-27
A	25-100	any	16-18
B	20-50+	any	14-16
C+	20-40+	some hills	13-14
C	15-40+	few hills	11-13
D	10-25	mostly flat	8-11

While bicycling is an outstanding recreational sport, it also involves risks and even dangers. Some of these dangers include but are not limited to: traveling on or crossing heavily traveled roads, winding roads, steep descents, potholes, accidents, unexpected moves of another rider, physical exertion, fatigue, flat tires, and motorists. Ride terrain, pace and distance may vary from the written or verbal description. In addition to the above, mountain bike rides may involve steep descents on heavily rutted roads, trails, as well as log and rock hopping.

I acknowledge that CBBC requires the wearing of helmets and agree to save and hold the Central Bucks Bicycle Club harmless for any injury resulting from my failure to wear a helmet.

The undersigned acknowledges that the risks recited above, as well as numerous other dangers are inherent in recreational bicycling and the undersigned agrees to assume all risks associated with participation in club activities. The undersigned further agrees to save and hold harmless the Central Bucks Bicycle Club, its officers, directors, coordinators, executive committee members, volunteers, other club members from any and all liability for any injury or damage resulting from, or in any way connected with, participation in club-related activities.

I warrant that I am competent to ride safely and that my bicycle and equipment are in safe working condition. I agree to obey all traffic laws and to practice safety and courtesy when cycling. I hereby consent to and permit any emergency treatment in the event of injury or illness.

In the case of children under the age of 18, I hereby agree to the terms of the above waiver on behalf of my child (children). I agree to abide by federal, state and local helmet laws as they apply to my child (children). I agree that the CBBC, its officers, activity organizers, ride leaders and other members have no obligation to provide instruction to, or supervision of my children.

I give to the Central Bucks Bicycle Club, its designees, agents and assigns, unlimited permission to use, publish and re-publish in any form or media, reproductions of my likeness, (photograph or video) with or without identification of me by name. I agree to not demand payment or any other compensation and agree to hold the above parties harmless of all liability arising from such use.

I HAVE READ AND UNDERSTAND THIS WAIVER. I AGREE TO BE LEGALLY BOUND BY IT.

X _____ X _____
X _____ X _____

This form must be signed by every applicant 18 years or older. Membership fee includes rights for all family members at the same address. The membership year is March 1st thru February 28th. For new members who join during October through February, membership runs through the following membership year. Initial annual membership fee is \$25; timely annual renewals are \$20. Late renewals (after Feb. 28) are \$25. Includes the club newsletter. Mail check and form to: CBBC, PO Box 1648, Doylestown, PA 18901