

**Bloomington Velo Cycling Program**  
**Revised October 31, 2018**

Effective: January 1 through December 31

Team Contact

Aaron Prange, President

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Dave Harstad, Vice President

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PO Box 8121 Bloomington, Indiana 47407

**Rider Responsibilities**

Represent the sponsors and ourselves professionally and responsibly, ride hard and perform beyond our natural abilities, and to have a great time along the way.

**Membership Requirements**

The Bloomington Velo Cycling Team is open to cyclists of all ages, genders, and abilities who are interested in bicycle racing and high performance training. Members may be Bloomington area residents, IU students, or if living outside of the community, are willing and able to be active participants in Bloomington Velo Cycling events in and around Bloomington and the region.

**Cost**

Team dues are \$125 for regular members and \$100 for Collegiate members and juniors under 18 years.

Please complete the Team Bloomington Velo application, waiver, and dues payment (make checks payable to Bloomington Velo Cycling)

**Bloomington Velo Cycling Program  
Membership Application**

Date
Name
Address
City / State / Zip Code
Home Phone
Mobile Phone
Email
Twitter
Facebook
Male / Female
Emergency Contact Name
Emergency Contact Phone
Prior Team / Little 500 Team
USA Cycling Member Number (if applicable)
Bikes you currently own: Road, Track, Cyclocross, Mountain Other:
Date of Birth / Racing Age in Year of Application
Occupation
Jersey Size _____ Bib Size _____ Glove Size _____
Signature and Date (Applicant) _____
Signature and Date (Guardian) _____

**Bloomington Velo Cycling Team**

**WAIVER AND RELEASE OF LIABILITY -- READ BEFORE SIGNING**

In consideration of being allowed to participate in any way in the Bloomington Velo Cycling program, its related events and activities, I,

\_\_\_\_\_, (name of participant) the undersigned, acknowledge, appreciate, and agree that:

- 1. 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,
- 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Company immediately; and,
- 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE Bloomington Velo Cycling program, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for the activity ("Releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property associated with my presence or participation, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

x \_\_\_\_\_ Age: \_\_\_\_\_ Date Signed: \_\_\_\_\_

PARTICIPANT'S SIGNATURE

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releases, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releases from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

x \_\_\_\_\_ Date Signed: \_\_\_\_\_

PARENT/GUARDIAN'S SIGNATURE (print name)