



Velo de Animas  
P.O. Box 6227  
Farmington, NM 87499

## 2010 Velo de Animas Bicycle Club Membership Application

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

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

E-Mail: \_\_\_\_\_

\_\_\_\_ \$10 Basic Membership    \_\_\_\_ \$20 Family Membership    \_\_\_\_ Number in Family

Family Members: \_\_\_\_\_

\_\_\_\_ New Membership    \_\_\_\_ Annual Renewal (Membership Year Jan-Dec)

Cycling interests:    \_\_\_\_ Road    \_\_\_\_ Mtn    Other \_\_\_\_\_

VdA Newsletter Delivery:    \_\_\_\_ Regular Mail    \_\_\_\_ E-mail

Volunteer Help:    \_\_\_\_ Durango100    \_\_\_\_ Club Officer    \_\_\_\_ Activities

\_\_\_\_\_ Other

IN CONSIDERATION of being permitted to participate in any way in Velo de Animas Bicycle Club-sponsored Bicycle Activities ("Activities") 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 are unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) bicycling activities involve risk 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 interactions, 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 Velo de Animas Bicycle Club, their respective administrators, directors, agents, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and leasers of premises on which Activity takes 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 "Releasees" or otherwise, including negligent rescue actions.

4. CONSISTANT with the organization's commitment to safety, helmets approved by recognized safety standards must be worn during all club-sanctioned rides.

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 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 be in full force and effect.

Signature (s) \_\_\_\_\_ Date: \_\_\_\_\_

If family membership, all members must sign; if under age 18, Parent/guardian must sign.