

Diablo Cyclists Membership Application

Membership Dues are \$20.00 for individuals. Membership runs for 12 months. Please print out this form, complete and sign it, make check payable to Diablo Cyclists, and mail to: Diablo Cyclists, P.O. Box 5011, Walnut Creek, CA 94596.

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone (Hm): (____) _____ Telephone (Cell): (____) _____

Email Address: _____

MEMBERSHIP INFORMATION

New Member / Renewal (circle one)

You may choose to be included in our online membership roster. This page is password protected and is only viewable by Diablo Cyclists members.

I would like to be included in the member Phone and Email listing: Yes _____ No _____

LEAGUE OF AMERICAN BICYCLISTS ("LAB") RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT ("AGREEMENT")

In consideration of being permitted to participate in Diablo Cyclists (Name of LAB Club) ("club") sponsored Bicycling activities ("Activity") 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, in good health, and in proper physical condition 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 to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) BICYCLING ACTIVITIES INVOLVE RISKS 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 inactions, 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 FRO LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the activity.

3. HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE the CLUB, the LAB, their respective administrators, directors, agents, volunteers, and employees, other participants any sponsors, advertisers, and if applicable, owners and lessors of the premises on which the Activity takes place, (each considered one of the "RELEASES" 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 NEGLIGENCE OF THE " RELEASEES" OR OTHERWISE INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if despite this RELEASE AND WAIVER OF LIABILITY I or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may occur as a result of this claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED FREELY AND WITHOUT ANY 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 THE AGREEMENT IS HELD TO BE INVALID, THE BALANCE NOTWITHSTANDING , SHALL CONTINUE IN FULL FORCE AND EFFECT.

Your signature: _____ date: _____