



VeloVixens Cycling Club  
 P.O. Box 4702  
 Chattanooga, TN 37405  
 www.VeloVixens.net

## VeloVixens Cycling Club Membership Application

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Occupation or field of work: \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

Phone/Home ( ) \_\_\_\_\_ Phone/Work ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

E-mail \_\_\_\_\_ Date of Birth \_\_\_\_\_

USCF License Number: \_\_\_\_\_ Category: \_\_\_\_\_

NORBA License Number: \_\_\_\_\_ Category: \_\_\_\_\_

USAT License Number: \_\_\_\_\_ Category: \_\_\_\_\_

\*You are not required to hold a race license to join, but it is best to if you intend to race.

### Emergency information:

Name: \_\_\_\_\_ Telephone(s): \_\_\_\_\_

Emergency Medical Information: \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\*Please return this application, waiver and check or money order to above address.

### **Team Kits:**

Type	Price	Payment Due	M or F	Size
Membership Dues	\$25	Yes		
Cycling jersey	\$60	No		
Cycling shorts	\$65	No		
Cycling bibs	\$65	No		
Socks	\$5	Yes		
Bell Sweep R Helmet	\$40	No	Available at East Ridge Cycles	
Tri Top	\$40	Yes	F only	
Tri Shorts	\$45	Yes	F only	
Team t-shirt/shorts	\$11 (for both)	Yes	Limited Quantities	
VeloVixens Running Hat	\$15	Yes		
Total Enclosed:				

*The VeloVixens Cycling Club's mission is to support women in competitive cycling and multi-sport through development, support and training opportunities. We are licensed and able to support women in all types of racing arenas, or simply provide the opportunity to learn. There is no requirement to race. While our focus is on competitive development, we strive to support women of all ages and abilities to be active, whether for recreation or sport. The VeloVixens also promote our community through support and volunteer efforts.*



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

In consideration of being allowed to participate in any way in the **VeloVixens Cycling Club** program, its related events and activities, I, \_\_\_\_\_, 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 USA Cycling, VeloVixens Cycling Club, 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 ("Releasees"), 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 RELEASEES 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 Releasees, and, for myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees 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)