

# 2012 Membership Application



www.longviewbicycleclub.com

Name(s) \_\_\_\_\_

Street: \_\_\_\_\_ City, \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home (     ) \_\_\_\_\_ Cell (     ) \_\_\_\_\_

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

I ride the following: Road Bike \_\_\_\_\_ Mountain Bike \_\_\_\_\_ Mountain Bike at Hamby Trail \_\_\_\_\_

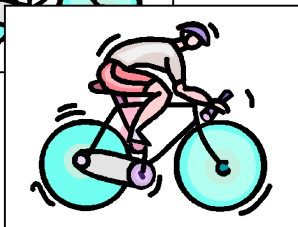
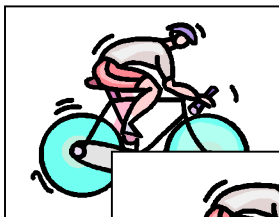
Membership: New \_\_\_\_\_ Renewal \_\_\_\_\_ Average cycling miles per year \_\_\_\_\_

Today's Date \_\_\_\_\_ Date of Birth(s) \_\_\_\_\_

## PLEASE READ AND SIGN:

In submitting this application, I hereby make known that I will hold blameless in the case of accident, injury, or damage of any kind, the Longview Bicycle Club, its officers, members and volunteers. I recognize that bicycling, like all forms of travel on public roads and streets and trails, is potentially dangerous, and I ride at my own risk. I further recognize that safety is my personal responsibility, and I agree to participate in keeping all LBC rides safe. I am aware of the club policy that all riders under the age of 18 must be accompanied by a parent or responsible adult, and even though adult bicyclists are not required by Texas law to wear helmets, I understand that wearing an approved helmet is required for participation in LBC rides.

Signature (or parent of minor) \_\_\_\_\_



### LBC MEMBERSHIP DUES

January . December  
Individual or Family Dues - \$25

Mail application and check to:

Longview Bicycle Club  
1609 Sweetbriar St.  
Longview, TX 75604

