

2018 MEMBERSHIP APPLICATION

Name:	Phone:
Address:	Email:
	*Date of Birth:
POSTAL CODE	
YES , I would like to be member of the Northumberland Hills Cycling Club!	TOTAL DUE \$40 or \$45 (before April 1, 2018) (after April 1, 2018)
COLLECTION OF PERSONAL INF	
I hereby consent to the Northumberland Hills Cycling Club's collection and/or possession of all personal information which I may have previously provided to the Northumberland Hills Cycling use of this personal information from time to time to advise me of activities and meetings of the person in the event of an emergency or accident affecting me and to apply and enforce any by-lar application for membership, I hereby consent to these uses and disclosures of my personal information.	g Club. I hereby consent to the Northumberland Hills Cycling Club's Northumberland Hills Cycling Club, to contact an appropriate was of the Northumberland Hills Cycling Club. By my execution of the
The undersigned by executing this application below hereby applies to become a member of the year to December 31st of the current year. In consideration of the Northumberland Hills Cyclin all by-laws of the Northumberland Hills Cycling Club and general rules of conduct as may be esta or its Board of Directors and to further abide by all regulations and requirements of the Highway Hills Cycling Club activities	ng Club accepting my application for membership, I agree to abide by tablished from time to time by the Northumberland Hills Cycling Clu
By signing I acknowledge that I have read and understood the WAIVER, RELEASE AND INDEMI	NITY below. as well as THE RISK MANAGEMENT POLICY.
Applicant's Signature: Date:	
WAIVER, RELEASE AND IND	DEMNITY
I am aware that by signing this application I am waiving substantial legal rights, including the giving I understand and agree that my participation in events, programs, or activities organized, operate Cycling Club ("the Club") is conditional upon my execution of this document.	- · · · -
I am aware that cycling involves the possibility of injury or death, and I accept these risks and all negligence, gross negligence, or negligent rescue by those associated in any way with the Club, events and programs take place or by those organizing, officiating, or participating in these event officers, directors, employees, sponsors, agents, servants, volunteers and representatives (the "R	events and programs I may be involved in, the venues at which these ts and programs throughout the year, including their respective
I understand that all applicable rules for participation and the rules, regulations, and by-laws of th PERSONAL SAFETY REMAINS WITH ME, including my physical and emotional preparation and and that I undertake and agree to remove myself from participation if I sense or observe any unuprogram, I feel unable or unfit to safety continue for any reason.	fitness to participate in all events and programs throughout the year
I give, a FULL RELEASE AND WAIVER OF LIABILITY AND ALL CLAIMS that I have, or may have liability for any loss damage, injury or expense that I may suffer as a result of my participation in evenue at which they may take place, due to any cause whatsoever including the forms of negliger or other duty of care including any duty of care owed under the relevant Occupier's Liability Act	any part or parts of the events or programs or my presence at any nce set forth above or from any breach of contract or statutory duty
I AGREE NOT TO SUE and I further agree TO INDEMNIFY AND SAVE HARMLESS the Releas type whatsoever arising from my participation in these events or programs.	sees from all expenses, fees, liability or damage award or cost of any
I HAVE READ AND UNDERSTOOD THIS WAIVER, RELEASE AND INDEMN waiving substantial legal rights (on my behalf and on behalf of my heirs, executiving up of my right to sue.	, , , ,
Applicant's Signature: Date:	
Mail completed application to: Northumberland Hills Cycling Club, c/o 155 Peacock Blvd., Port H start of your first ride and give to the ride leader.	lope ON LIA 4E4 or bring completed application and payment to the
OFFICE USE ONLY Payment Rec'd: Date:	'hegue