

2015 Chico Velo Bike Squad Application Form

Complete this form to participate in the Chico Velo Bike Squad Program. Please list below your contact information, cycling profile and program preference to become a member of the Bike Squad. Your participation will be vital in helping spread the love of cycling to fellow Chico community members.

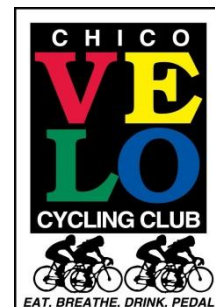
Name:

Cell Phone:

Email:

I participate in the following types of cycling (check all that apply):

- Recreational/Fitness riding
- Road biking
- Mountain biking
- Bike Commuting (to work/school specifically)
- Run errands, do chores on bike
- I ride bikes with my children
- Other:



2015 Chico Velo Bike Squad Volunteer Program Options:

We ask you to participate in at least two Bike Squad programs but you may participate in as many programs as you wish! Anyone who participates in at least two programs receives a Velo Club T shirt.

T shirt style - **circle one** : Men/Women **circle one**: Tech/Cotton **circle one** : SS/LS

T shirt size - **circle one** : S M L XL XXL XXXL

Please select the program(s) you would like to get involved with.

- Light Up Chico** – carry bike lights to give out to ‘unlit’ cyclists while riding at night
- Bike Commuter Buddies** – provide personal support to novice bicycle commuters by helping them map out a safe route and then riding it with them a few times
- Ride Rangers** – wear a special Chico Velo jersey (purchased at cost, \$40) at the Wildflower and our other rides, and commit to helping anyone who has a question or problem OR be a course marshal at one of our rides.
Jersey style and size - **circle one**:Men/Women **circle one**: S M L XL XXL XXXL
- Rodeo Wranglers** – assist in teaching bike skills to kids at bike rodeos in local schools
- Bike Valet staff** – help staff our local bike valet engagements

Flip page over to sign liability waiver



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I acknowledge that bicycle riding can be a test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to athletics, but are also present for volunteers. I hereby assume all of the risks of participating and/or volunteering in Chico Velo events. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault. I certify that I am physically fit, have sufficiently trained for participation in events and have not been advised otherwise by a qualified medical person. I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and responsibilities at said events. In consideration of my application for membership, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me or my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: Chico Velo Cycling Club, their directors, officers, employees, volunteers, representatives, and agents, event holders, event sponsors, event directors, event volunteers; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of any of my actions during events. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and or illness during events.

I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and or assigns. This AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I hereby certify that I have read this document; and, I understand its content.

Name:

Signature:

Parent Signature if under the age of 18:

Date: