

PEACE RIVER RIDERS Bicycle Club

Application Renewal Form



Select One:

____ New Member

____ Renewal

Select One:

____ Single

Membership Fee must accompany application
Signatures are REQUIRED

PEACE RIVER RIDERS Gift Certificate for a one year membership

1. I 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 PEACE RIVER RIDERS activities. I further acknowledge that PEACE RIVER RIDERS activities 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 warrant that at any time I believe conditions to be unsafe; I will discontinue further participation in the PEACE RIVER RIDERS.
2. I UNDERSTAND that, (a) bicycling activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis and death; (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: hence I fully accept and assume all such risks and all responsibilities for losses, costs and damages I incur as a result of my participation in the PEACE RIVER RIDERS activity.
3. I HEREBY release, discharge and covenant not to sue PEACE RIVER RIDERS, the LAB, the respective administrators, directors, agents, officers, volunteers, and employees, other participants, sponsors, advertisers, owners and lessors of premises on which the activity takes place (each considered one of the "Releasees" herein) from all liability, claims, demands, losses, or damages on my account caused in whole or in part by the negligence of the "Releasees" to include negligent rescue operations; I further agree that if despite this Release and Waiver of Liability, assumption of risk, and indemnity agreement. 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 may occur as a result of such claim.

I HAVE READ THIS AGREEMENT, fully understand the terms, understand that I have given up substantial rights by signing it, and have signed it 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 this agreement is held to be invalid, the balance shall continue in full force and effect.

Name(s): _____ & _____

Date: _____ Phone: _____ E-mail: _____ Date of Birth: _____

Street Address: _____

City/State/Zip: _____

Signature(s) _____ & _____

Parent/Guardian (If member is under 18) _____

In Case of Emergency please contact Name: _____ Emergency Phone: _____

Make checks payable to Peace River Riders
Mail payment (no cash) to:
Peace River Riders
C/O Peggy Nederveld
1640 Atares Dr #15
Punta Gorda, FL 33950