

California Bicycle Racing

2010 Annual Membership Application

714/356-1214 ♦ VNCRacing@hotmail.com ♦ P. O. Box 114; Sunset Beach, CA 90742-0114

Membership term is from 01/01/2010 to 12/31/2010 www.CaliforniaBicycleRacing.org please laminate my license

Racing age is whatever age you are on December 31, 2010. Juniors are racing ages 17 years & below

CBR Road Racer Membership Fees (check 1 box only)	Adult-\$30 (until 1/15/10) <input type="checkbox"/>	Adult-\$50 (after 1/15/10) <input type="checkbox"/>	Junior-\$10 <input type="checkbox"/>	Insider's Club-\$500 <input type="checkbox"/>
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EMAIL will be our primary communication for changes, notices, etc.

Email	
Name	
Street	
City, St. Zip	

Racing Club _____ Birthdate _____

Emergency Contact Name _____ Contact Phone _____

Telephone Home _____ Work _____ Mobile _____

Best contact? Email (H) Phone (M) Phone (W) Phone Snail Mail

CBR Road Racer Membership **NEW** **Road Racing Category** →

New members: please send in documentation to substantiate the above category if you have prior experience. Racers new to bicycle racing will be given a Road Category V (Novice).

ADMISSION OF RISK AND LIABILITY RELEASE (sign/date at the **X**)

I am applying for racing membership in California Bicycle Racing. I understand and accept the fact that racing a bicycle can be dangerous & fatal, and I fully accept the risk that may be involved. **I wish to forever release California Bicycle Racing, its clubs, employees, members, promoters, officials, volunteers, participants and sponsors from any liability due to any accidents in bicycle races involving California Bicycle Racing.** I

presently do not know of any mental or physical condition that would affect my ability to participate in bicycle races except for _____

X

X

Signature of Applicant (Must be signed in permanent, non-erasable ink)

Dated

PARENT OR GUARDIAN MUST COMPLETE THIS FORM FOR MINORS

I am the parent or guardian of the above listed Applicant, and assure California Bicycle Racing that the facts listed above concerning my child or ward are true. By signing this form I am giving my permission for my child or ward to enter any bicycle race or event sanctioned by California Bicycle Racing during the period of the membership applied for **and also agree to the terms of the above listed ADMISSION OF RISK AND LIABILITY RELEASE.**

Signature of Applicant (Must be signed in permanent, non-erasable ink)

Dated

Please make your check payable to and mail it, along with this form to
California Bicycle Racing, Post Office Box 114; Sunset Beach, CA 90742-0114