

GVC Application and Waiver Form

Date	Home Phone#	Cell Phone#
Name (s)		
Address		
City	State	Zip
Email Address		
Calendar Username		
Emergency Contact		Emergency Phone#
Dues Please check one \$15 Individual [<input type="checkbox"/>] \$20 Family [<input type="checkbox"/>] \$30 2yr Individual [<input type="checkbox"/>] \$40 2yr Family [<input type="checkbox"/>]		

League of American Wheelmen d/b/a League of American Bicyclists (“LAB”) Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement

(“Agreement”)

In Consideration of being permitted to participate in any way in GREEN VALLEY CYCLISTS (“Club”) sponsored Bicycling Activities (“Activity”) I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. **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 such Activity. I further acknowledge that the Activity 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 further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity.
2. **Fully Understand** that: (a) BICYCLING ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH (“RISKS”); (b) these Risks and dangers may be caused by my own actions, or the 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” NAMES BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMEAGES I incur as a result of my participation in the Activity.
3. **HEREBY RELEASE, DISCHARGE, AND CONVENANT NOT TO SUE** the Club, the LAB, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, 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 OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE “RELEASEES” OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND 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 “ Releases”, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any many incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS 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, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE. AND EFFECT.

Printed Name of Participant _____ Participants Signature _____
 Date _____

MINOR RELEASE AND PAENTAL CONSENT FORM UNDER AGE 18

I, the minor’s parent and or legal guardian, understand the nature of bicycling activities and the minor’s experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity. I hereby release, discharge, covenant not to sue, and agree to indemnify and save and hold harmless each of the releases’ from all liability, claims, demands, losses, or damages on the minors account caused or alleged to be caused in whole or in part by the “releases” or otherwise, including negligent rescue operations and further agree that if, despite this release, I the minor, or anyone on the minor’s behalf makes a claim against any of the “releases” named above, I will indemnify, save, and hold harmless each of the releases from any litigation expenses, attorney fees, loss liability, damage, or cost any which may incur as the result of any such claim.

Full Name of Minor
 Participant _____

Full Name of Parent or Legal Guardian _____
 Date _____

**Mail Application with Check and Waiver to:
 Green Valley Cyclists
 331 Barletta Ave
 Las Vegas, Nv 89123**