STOWE BIKE CLUB, INC. 2025 MEMBERSHIP APPLICATION and WAIVER **Time Trial Series**

Individual \$10.00 Family \$15.00 Non Member Participant (up to 2 events)	
Name:	Birth Date:
Email address:	
Home Address:	
Phone:	
Additional Family Member Names, birthdates, and emails:	
or on my own racing "virtually" and may particip (SBC). I hereby acknowledge that these events are standards for personal and environmental protect helmet and that traffic laws must be obeyed while and regulations governing these events and any ability to safely participate. I know that participand that I should not participate unless I am massociated with participating including, but not I vehicles, the effects of the weather, including high all such risks being known to and appreciated by these events. I hereby indemnify and hold the Stoliability for damages, injuries or other losses assimilated the results thereof, incurred and suffered by me in may arise out of negligence or carelessness, prowillful. The Stowe Bike Club is not responsible participating in an event. I give my consent for a health damaging situation and should I require a photos, videotapes or other recordings of me part by SBC.	ay participate in the Time Trial series either in-person pate in other events put on by the Stowe Bike Club, Inc. e a physical activity and that all rules of the events and tion must be followed. I understand that I must wear a e riding in these events. I agree to comply with all rules decision of the SBC Time Trial officials regarding my ating in such events is a potentially hazardous activity redically able and properly trained. I assume all risks limited to, falls, contact with other participants, motor heat and humidity, and the conditions of the roadways, me. I am in good health and fully able to participate in two Bike Club, Inc. and its Officers, harmless from any sociated with my participation. I understand that SBC rosses to personal property, or for any bodily injuries or an connection with these events even though that liability roided such negligence or carelessness is not gross or for any traffic incidents I may be involved in while medical release should I be involved in any accident or nedical treatment. I grant permission for the use of any ficipating in these events used for promotional purposes
Signature Member/Participant:Additional signatures:	Date:

***SBC membership entitles you to participate in the full time trial series and social gatherings May through August 2025 and any social events planned, as well as miscellaneous other events. Participants may ride in up to two time trials before joining. All riders must sign waiver. Send completed application and check (made payable to Stowe Bike Club) to: Donna Smyers Treasurer, Stowe Bike Club, PO Box 102, Adamant, VT 05640. If riding no more than 2 Time Trials, you may email the completed form to dosmyers@gmail.com. For more information email: stowebikettclub@gmail.com or Facebook: Stowe Bike Club

Family members:

Guardian Signature for minors: