



National Road Bicycle Club
P.O. Box 3940
Terre Haute, IN 47803
nationalroadbike@gmail.com

Dear Fellow Cyclist:

The NRBC Board of Directors would like to thank you for your continued support. The club sponsors group rides from Hawthorn Park two nights a week from April to the first of October. We also have special rides on several weekends a year. Club rides are open to all riders (children under 18 must be accompanied by an adult) of all levels of ability—*membership to the club and the signed waiver on the reverse side is required moving forward*. Club members receive a monthly newsletter that has articles on fitness and bicycling. Additionally, we supply the newsletter to local bicycle shops and local city offices and host the biketh.org web site.

The new governing board comes with the club's recent change to a 501(c)(3) nonprofit organization. We would like to thank Dan Watson for facilitating the club for over 20 years and helping with this transition. It is our hope that this update will continue to help the club foster friendship and fun with cycling in our community, while providing safe and organized rides. We will be purchasing insurance for the club through the League of American Bicyclists. A discount to join the League will be available for NRBC members and includes perks such as a print copy of *Bicycling Magazine* and options for discounts on additional personal medical insurance, if desired.

We plan to purchase the insurance in early February and will need to give our best estimate of membership. With that, it is now that time of year to collect dues so that we can continue to support bicycling in the Terre Haute area. The dues will largely go to fund the new adoption of insurance for the club as mentioned above. Our dues schedule is listed below. Please fill out this form and return with payment to the above address. We will email our newsletter to you as a PDF file, so please supply that information. If you wish to be mailed a hard copy of the newsletter please indicate that below. Thank you again for your financial support. We can also use your support as volunteers for ride leaders, help with the St. Patrick's Day Ride or for articles for the newsletter.

Annual Dues (*circle membership type*): Single \$20.00 Family \$35.00 (up to 4 family members)

Name(s) _____

Address _____

Phone _____ Email _____

Delivery of newsletter: Mailed _____ Emailed _____

Thank you for your continued support in 2019!

Please complete waiver on the reverse side. (Family memberships: Complete waiver for each member.)

Loyally in Cycling, NRBC Board of Directors

Matt Kelley, President – kelly.matt@rocketmail.com | **Jessica Markle**, Vice President – jessica.markle@indstate.edu
Jane Neier, Secretary – jneier@yahoo.com | **Kurt Bryan**, Treasurer – bryan@rose-hulman.edu
Jim McKinney, Ride Coordinator – mckinney@rose-hulman.edu | **David Henthorn**, Public Information Coordinator – henthorn@gmail.com
Joe Van Denburg, Webmaster – ioe@isbikesracing.com

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, AND PARENTAL CONSENT AGREEMENT
("Agreement") for
LEAGUE OF AMERICAN WHEELMAN D/B/A LEAGUE OF AMERICAN BICYCLISTS ("LAB")
(this form is to only be used for Individual Adults or for Adults on behalf of Minors)

IN CONSIDERATION of being permitted to participate in any way in _____ (enter name of LAB Club) ("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 inactions, the actions or inactions of others participating in the Activity, the conditions 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; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I may incur as a result of my participation in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Club, the LAB, its 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 Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I AM 18 YEARS OF AGE OR OLDER, HAVE READ AND UNDERSTAND THE TERMS OF THIS AGREEMENT, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL RIGHTS BY SIGNING THIS AGREEMENT, HAVE SIGNED IT VOLUNTARILY 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. I AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PARTICIPANT'S NAME (PRINTED): _____

PARTICIPANT'S SIGNATURE (only if age 18 or over): _____ **I HAVE READ THIS RELEASE**

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: (_____) _____ DATE: _____

MINOR RELEASE

(complete for Participants Under the Age of 18)

AND 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 RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S 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 FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

MINOR'S NAME (PRINTED): _____ BIRTH DATE OF MINOR: _____

SIGNATURE OF MINOR PARTICIPANT: _____ **I HAVE READ THIS RELEASE**

PARENT/GUARDIAN NAME (PRINTED): _____

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): _____ **I HAVE READ THIS RELEASE**

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: (_____) _____ DATE: _____