

# LEHIGH WHEELMEN ASSOCIATION - INSTANT MEMBERSHIP APPLICATION -

NAME: \_\_\_\_\_ DATE: \_\_\_ / \_\_\_ / \_\_\_  
EMAIL: \_\_\_\_\_ @ \_\_\_\_\_  
STREET: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ - \_\_\_\_\_ CELL: \_\_\_\_\_ - \_\_\_\_\_

AMOUNT     INDIVIDUAL @ \$15/YEAR     FAMILY @ \$25/YEAR

Family Members: \_\_\_\_\_

**Please check areas where you are interested in helping out:**

- |  |  |
|--|--|
| <input type="checkbox"/> Grill & Chill             | <input type="checkbox"/> Picnic        |
| <input type="checkbox"/> Donut Derby               | <input type="checkbox"/> Gap Gallop    |
| <input type="checkbox"/> Holiday Party             | <input type="checkbox"/> Race Support  |
| <input type="checkbox"/> Board or Officer Position | <input type="checkbox"/> Leading Rides |

***Please sign the Waiver on the reverse side, attach payment (checks payable LWA) and give to any LWA board member or just mail it to LWA, PO Box 140 Trexlertown, Pa. 18087.***

***Welcome to the Lehigh Wheelmen!***



Additional information at: [www.lehighwheelmen.org](http://www.lehighwheelmen.org)

[www.meetup.com/Lehigh-Wheelmen-Association](http://www.meetup.com/Lehigh-Wheelmen-Association)

**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, INDEMNITY, AND PARENTAL CONSENT AGREEMENT ("Agreement") for LEHIGH WHEELMEN ASSOCIATION,**

IN CONSIDERATION of being permitted to participate in any way in a LWA sponsored activity of any kind, including but not limited to social, organizational or bicycling activities ("Activity" or "Activities") I, for myself, my personal representatives, assigns, heirs, and next of kin: 1. ACKNOWLEDGE, agree, and represent that I understand the nature of Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activities. I further acknowledge that Activities may be conducted over public roads and facilities open to the public during the Activity and upon which hazards, whether foreseeable or unforeseeable, are to be expected. I further agree and warrant that if, at any time, I believe conditions to be inadequate or unsafe, I will immediately discontinue further participation in the Activity. 2. FULLY UNDERSTAND that (a) ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS AND DEATH ("Risks"); (b) these Risks may be caused by my own actions or inactions, the actions or inactions of others, whether or not participating in the Activity, the conditions in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" DEFINED BELOW and/or third parties to this Agreement; (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 LWA, the League of American Bicyclists, their respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, 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, WHETHER DIRECT, INDIRECT, CONSEQUENTIAL, SPECIAL OR PUNITIVE, CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING BUT NOT LIMITED TO NEGLIGENT RESCUE OPERATIONS (COLLECTIVELY, THE "DAMAGES". I FURTHER AGREE that if, despite this 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, Damages, or costs which any may incur under 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 THAT THIS AGREEMENT CONSTITUTES A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY AND DAMAGES 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. THIS AGREEMENT IS MADE UNDER, AND SHALL BE INTERPRETED BY, THE SUBSTANTIVE LAWS OF THE COMMONWEALTH OF PENNSYLVANIA, EXCLUDING ITS CONFLICTS OF LAW PROVISIONS

Name: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_