



## MEMBERSHIP APPLICATION

Application Date: \_\_\_\_\_

Membership is \$25 per year for a family  
(immediate family members living in the same household).

Name(s)		Gender	DOB (m/d/yyyy)
		M or F	
		M or F	
		M or F	
		M or F	
<b>Email</b>			
<b>Zip</b>		<b>Mobile Phone Carrier</b>	
<b>Home Phone</b>		<b>Mobile Phone</b>	
<b>Emergency Contact Name</b>		<b>Emergency Contact Phone</b>	
<b>May we share your contact information with other MBA members?</b>			<b>Y</b>
			<b>N</b>
<b>Choose-&gt;</b>	Regular Member \$25/annually		If renewing membership and 70 or Older by the end of the year membership is free
			Optional Donation Amount:

**HELMETS ARE MANDATORY ON ALL MBA RIDES**  
RELEASE, WAIVER, AND INDEMNIFICATION AGREEMENT (on next page)  
MUST BE SIGNED BY ALL ADULT (18 OR OLDER) FAMILY MEMBERS



**MEMBERSHIP APPLICATION**

Applicant Name: \_\_\_\_\_

**RELEASE, WAIVER, AND INDEMNIFICATION AGREEMENT**

Every physical activity carries some measure of risk, ranging from minor strains and bruises to serious injury, including death. As the COVID-19 pandemic has taught us, simply gathering among other people may carry risks such as contracting illness. I recognize those risks as well as the risks inherent in bicycling activities (i.e., from road conditions, other cyclists, weather, livestock, etc.) and understand neither I nor my children or wards will be allowed to participate in bicycling events or their related activities unless we give up the right to hold the hosts and organizers of the events responsible for any injuries or damages we might suffer.

So, on behalf of myself, my children or wards, our heirs, and anyone else who might claim to represent us or act in our place or on our behalf, I agree to the following:

- I release Michiana Bicycle Association, Inc., and all of its officers, employees, volunteers, agents and representatives (collectively, “the released parties”) from any liability for any injuries, losses, or damages to person or property.
- This release will bar any and all claims against the released parties, no matter how those claims might arise. Even if the released parties’ own negligence leads to injury or loss, this agreement will protect the released parties from liability or suit.
- To fully shield the released parties, I will defend them, indemnify them, and hold them harmless from any liability or losses they might incur, including attorney’s fees, resulting from any claims, demands, or lawsuits that might arise out of our participation in the bicycling events.
- Since publicity is an important part of the events, I will allow the released parties to use my or my child’s or ward’s name and likeness as they see fit in any advertising, photographs, video, or recordings, and I waive the right to inspect or approve any media the released parties might create or use.
- I understand Michiana Bicycle Association, Inc., is an Indiana not-for-profit entity, and I agree that this agreement must be interpreted, governed, and applied according to Indiana law.

I have read this entire document. I understand what it means, I understand it is a binding agreement, and I sign it or e-sign it voluntarily to participate in the bicycling event.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_