

**Sun City TX Cyclists Non-Resident Registration & Waiver
Hold Blameless and Indemnity Form
2019**

1) Print name: _____

2) Print name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ E-mail: _____

1) Cell Phone: _____ 2) Cell Phone _____

Administrative Fee: The fee of \$10 for the first registrant in a household and \$5 for the second in the household will be applied to those wanting to be included in Sun City Cyclists' activities. Please make checks payable to & mail to:

Sun City TX Cyclists, 147 Great Frontier Dr. Georgetown, TX 78633

Please include fee with registration form. Fee received in December of the calendar year will be regarded as registration for the remainder of the current year and the following year.

New registrant? Renewal? (Please check one)

Please read and sign below:

I recognize by joining Sun City TX Cyclists (SCTXC), I hereby make known that I will hold blameless and fully indemnify (including legal expenses) in the case of accident, injury, illness or damage of any kind SCTXC, its officials, members and volunteers. I recognize that bicycling, like all forms of travel, is potentially dangerous, including the possibility that property damage, illness, injury or death may result, and I voluntarily participate at my own risk. I further recognize that safety, personal fitness, riding ability and condition of bicycling equipment are my personal responsibility. I agree to participate in keeping all SCTXC rides safe. I further understand that wearing an approved helmet is required for participation in SCTXC rides.

I intend that this agreement be binding on my heirs, executors, administrators, legal representatives, assigns, and successors in interests. I understand that these provisions may not be waived orally.

Signature: _____ Date _____