



BRAZOS VALLEY MOUNTAIN BIKE ASSOCIATION

Membership Application
Contact Info: bvmbainfo@gmail.com
PO BOX 9603
College Station, TX 77842



Please Print or Type-Use Black Ink

Name: _____ Age: _____

Membership Type: [] New-Individual [] New-Family
[] Renewal-Individual [] Renewal-Family

If family membership, other family member's names and ages: _____

Contact Information:

Mailing Address: _____

City: _____

State: _____ ZIP: _____

Phone: _____ E-mail: _____

Do you want your e-mail added to the BVMBA Google Discussion Group? [] Yes [] No
(most of the club's communication takes place here)

Alternate e-mail(s) to use with the group: _____

In the event of an emergency, contact:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

I consent to the publication of my name, photo, or contact information in a printed BVMBA club directory for distribution to club members only: [] Yes [] No

Dues and Membership: New individual and family membership dues are \$30 for the first year. Renewals are \$75 per year.

This completed application form, waivers - including Millican Reserve waiver, and payment may be submitted at any club function, by mail or by email. Membership will be valid until February 1st of the following year.

New Membership dues are prorated based on the month you join.

Feb.-April
\$30.00

May-July
\$22.50

Aug.-Oct.
\$15.00

Nov.-Jan.
\$7.50

* As an incentive, renewing membership dues may be discounted by \$5 for each service hour completed during the prior year (conditions apply). These service hours may include, but are not limited to, activities such as trail maintenance, club website development, race volunteer, etc.



BRAZOS VALLEY MOUNTAIN BIKE ASSOCIATION



RELEASE AND INDEMNITY AGREEMENT

EACH FAMILY MEMBER MUST SIGN THE AGREEMENT

Please read and sign:

I hereby make known that I will hold blameless the Brazos Valley Mountain Bike Association, it's officers, members, and volunteers, in the case of accident, injury or damage of any kind. I recognize that bicycling is potentially dangerous and I will use safe equipment. Even though bicyclists are not required by Texas law to wear helmets, I agree to wear a helmet when participating in any club rides and that I assume full responsibility for the selection and fitting of the helmet. By wearing a helmet, I understand the risk of serious, permanent head injury is greatly reduced. I understand that safety is my personal responsibility, and I agree to participate in keeping all BVMBA rides safe. I understand that all rides are on public roads and/or private property and that I will ride at my own risk. I am aware of the club policy that a parent or responsible adult must accompany all riders under the age of 18.

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Name: _____ Signature: _____ Date: _____

Parent or Guardian of Minor(s): I, as parent or guardian of the above named minor(s), hereby agree, individually and on behalf of my child, children or ward(s) to all terms contained in this Agreement.

Signature of parent or guardian if Member is a minor

Date: _____