



Southwestern Cycling Centre of Ontario

1246 Huntwick Place
LaSalle, Ontario, Canada
N9H 2B4

Southwestern Cycling Centre of Ontario Membership Application

THIS APPLICATION CONSISTS OF TWO (2) SIDES BOTH OF WHICH MUST BE COMPLETED

Membership Type: (check one): Initial _____ Renewal _____

Athlete Name: _____

Street, Apt. _____

City, Province, Postal Code: _____

Phone: _____ Cell: _____

Email: _____ Primary Contact: _____

Date of Birth: _____

OCA Licence # _____

UCI Licence # (if applicable) _____

Other Racing Licence(s): _____

Legal Guardians/Parents (if athlete is under 18, otherwise indicate emergency contact):

Contact #1 name: _____

emergency phone number: _____

Contact #2 name: _____

emergency phone number: _____

Consent to Photograph and Record

Images and recordings will be used in training and competition to further athletic development and to promote the mission of the Southwestern Cycling Centre of Ontario. Images and video recordings will be used in assessing athletic position, tactics, bike-fit and several other cycling related dimensions. Images and videos may be used to promote athletes and their performances in various media sources.

Your completion of this form is genuinely appreciated. If there are any special considerations or conditions you wish to request, please feel free to contact the Executive Director.

Yes

I hereby give permission for the usage of images and recordings to be used by the Southwestern Cycling Centre of Ontario or media. I understand that the athlete may be identified by name in the media.

No

I hereby apply for membership in Southwestern Cycling Centre of Ontario (“SCCO”) and in the above named amateur regional cycling centre and related activities. I acknowledge that by signing this document, I am releasing Southwestern Cycling Centre of Ontario and its sponsors, members, directors, officers, attorneys and employees from liability of any kind.

I ACKNOWLEDGE THAT CYCLING IS AN INHERENTLY DANGEROUS SPORT WHERE SERIOUS INJURY AND DEATH CAN AND DOES OCCUR.

I understand and agree that I will participate in all SCCO and regional activities at my own risk. I further understand and agree that the SCCO is a non-profit entity that provides cycling activities for its members and for the advancement of the sport, which will be a direct benefit to me.

Therefore, on behalf of myself, my heirs, successors and assigns, and personal representatives,

I HEREBY WAIVE, RELEASE, HOLD HARMLESS, DISCHARGE, INDEMNIFY AND PROMISE NOT TO SUE SOUTHWESTERN CYCLING CENTRE OF ONTARIO, its sponsors, members, directors, officers, attorneys and employees (collectively the “Released Parties”) from any and all rights and claims including those arising from the Released Parties’ own negligence, which I have or which I may hereafter accrue from any and all damages sustained by me of any kind directly or indirectly in connection with, or arising out of, my participation in any races, training/SCCO rides or other activities run, sponsored, promoted or encouraged by the SCCO or travel to or return from such activities. I represent that, based upon a recent physical examination by a licensed medical provider, to the best of my knowledge I have no undisclosed medical or physical condition that would affect my ability to participate in bicycle racing or any SCCO event or that my participation would endanger my health. I acknowledge that I have been advised to read this entire document and the attached Rules and Regulations carefully and that they have legal consequences. I represent that I have read both documents carefully, that I agree to abide by the promises I am making in this application, and that I am knowingly and voluntarily signing this application. I understand that the SCCO is relying upon my promises in this application and would not grant me membership in the SCCO without my promises. If accepted as a member of the SCCO, I agree to abide by all the SCCO’s Rules, Regulations and Bylaws.

Athlete’s Signature: _____

Date: _____

Parent’s Signature: _____

Date: _____

(If under 18, a parent or guardian’s signature is required. Parent/guardian must be present when signing)

MEMBERSHIP INFORMATION, COSTS AND BENEFITS CAN BE FOUND ON THE SCCO WEBSITE [HTTP://SOUTHWESTERNCYCLINGCENTRE.CA](http://southwesterncyclingcentre.ca). ALL MEMBERSHIPS EXPIRE ON DECEMBER 31 OF THE CURRENT YEAR.

THANK YOU AND SAFE RIDING.