(Rev. 12/2023)

## NIAGARA FRONTIER BICYCLE CLUB MEMBERSHIP APPLICATION NFBC/LAB RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT

In consideration of being permitted to participate in any way in the NFBC sponsored bicycling activity, I for myself, my personal representatives, assigns, heirs, and next of kin:

- 1. ACKNOWLEDGE, agree and represent that I understand the nature of this bicycling activity, and that I am qualified, in good health, and in proper physical condition to participate in such activity, I further acknowledge that the activity will be conducted over public roads and facilities open to the public during the activity and upon which the hazards of traveling are to be expected. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the activity.
- 2. FULLY UNDERSTAND that (a) bicycling activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis and death; (b) these risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the activity, the conditions in which the activity takes place, or the negligence of the releasees named below; (c) there may be other risks and social and economic losses whether 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 incur as a result of my participation in this activity.
- 3. HEREBY RELEASE, discharge and covenant not to sue the NFBC, the LAB, their respective administrators, directors, agents, officers, volunteers and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessers of premises on which the activity takes place, from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise, including negligent rescue operations; and I further agree that if, despite this release and waiver of liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf, makes a claim against any of the releasees, I will indemnify, save, and hold harmless each of the releasees from any litigation expenses, attorney fees, loss, liability, damage or cost which may occur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE, AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE NOTWITHSTANDING SHALL CONTINUE IN FULL FORCE AND EFFECT. FURTHERMORE, I HAVE ALSO READ AND UNDERSTAND THE DUTIES OF A RIDER (see NFBC website - documents).

NAME				
STREET			Addres	s Change? Y N
CITY				
STATEZIP	CELL #		HOME #	
PRIMARY MEMBER E-MAIL			Ema	ail Change? Y N
SECOND MEMBER E-MAIL			Em	ail Change? Y N
PRIMARY MEMBER NAME/GUARDIA	N SIGNATURE	DATE	MEMBER #	BIRTHDATE (if under 18)
PRINT SECOND MEMBER NAME	SIGNATURE	DATE	MEMBER #	BIRTHDATE (if under 18)
PRINT THIRD MEMBER NAME	SIGNATURE	DATE	MEMBER #	BIRTHDATE (if under 18)
PRINT FOURTH MEMBER NAME	SIGNATURE	DATE	MEMBER #	BIRTHDATE (if under 18)
Family - \$40 (includes	any 2 adults and their children under	18 living at the sar	me address)	**********
Send check payable to NFBC	(if applicable) along with sign	ed application	to: NFBC c/o	Kathy Karnath

Send check payable to NFBC (if applicable) along with signed application to: NFBC c/o Ka 159 W

c/o Kathy Karnath 159 Wyeth Dr, Getzville NY 14068