



2010 Membership Application

First Name		Last Name	
Address			
City		State	Zip
Home Phone	Work Phone		Cell Phone
Email		Date of Birth	

Annual Membership Options

- Individual \$25.00
 Family \$40.00
 Full-Time Student \$10.00
 Junior Racer \$Free

Family Members

Name	Relation	D.O.B.
Name	Relation	D.O.B.
Name	Relation	D.O.B.
Name	Relation	D.O.B.
Name	Relation	D.O.B.

Please make check or money order to:

Chico Corsa Cycling Club
 3083 Whistler Way
 Chico, CA. 95973

TOTAL AMOUNT ENCLOSED \$ _____

Please check any boxes that appeal to you and we will be in touch

- Ride leader
 Race volunteer
 Newsletter
 Website calendar up keep

I have special skills and or would like to help the club in the following area:

Release of Liability

Chico Corsa Cycling Club is a club for the sole purpose of providing its members with notification of central meeting points and times. Members freely elect to ride together as a group, following a route of choice. In signing this form for myself and / or my family members I understand and agree to absolve Chico Corsa, it's organizers, sponsors and fellow members from all blame for any injury, misfortune, harm, loss of/or any inconvenience suffered as a result of participation in any ride or activity associated with or sponsored by Chico Corsa. I further understand that I, as an individual am responsible to abide by all traffic laws and regulations. I take full responsibility for my actions.

SIGNATURE _____ DATE ____/____/____

THANK-YOU – WELCOME TO THE CLUB!