

**Our Membership year is January 1st to December 31<sup>st</sup> so please renew RIGHT AWAY!**

**THE HAMILTON CYCLING CLUB  
APPLICATION FOR MEMBERSHIP, 2009**

(Please complete ALL sections even if this is a renewal.)

NAME: \_\_\_\_\_ GENDER: \_\_\_\_ AGE (as of 31/12/08): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Day/Month/Year

ADDRESS: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City Postal Code Telephone Email

CATEGORY (see below - if Assoc name of club): \_\_\_\_\_ UCI/OCA Lic # \_\_\_\_\_

e-mail address: \_\_\_\_\_

Family \$60 (+\$25 per active family member for insurance)\* ☐

Senior (18\* or older) \$50 (+\$25 for insurance)\* ☐

Junior (15-17\* inclusive) \$25 (+ \$25 for insurance)\* ☐

Cadet (13-14\* inclusive) \$25 (+ \$25 for insurance)\* ☐

Veteran (40\* or older) \$50 (+ \$25 for insurance)\* ☐

Associate \$5 (restricted privileges - must be a member of another OCA affiliated club) ☐

Honourary \$nil (+\$25 for insurance)\* ☐

**New Memberships optionally add \$60 for each club Jersey (min 1)**

Indicate Jersey Size & Quantity: S ☐ \_\_ M ☐ \_\_ L ☐ \_\_ XL ☐ \_\_ XXL ☐ \_\_

We need Member Volunteers to help run events. Please indicate which months suit you best & # of times you can help

A ☐ M ☐ J ☐ J ☐ A ☐ S ☐ # of times in Total 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ More ☐

**\*Note Insurance covers you when riding in club events. Only if you have obtained such insurance when applying for a race license or as a member of another club can we waive the \$25 fee. Age above is as at Dec 31<sup>st</sup> of prior year. Entry of your UCI License # above will confirm such coverage.**

If joining as a family, please include the following information on other family members:

NAME	DATE OF BIRTH (d/m/y)	RELATIONSHIP

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF PARENT OR LEGAL GUARDIAN: \_\_\_\_\_ DATE: \_\_\_\_\_  
(if applicant under 18 years)

By signing the above, I declare that I, \_\_\_\_\_, am not under suspension by any other athletic governing body. I will agree to abide by the rules of the Hamilton Cycling Club as stated in its constitution and rules. I agree for myself, my heirs, executors and administrators to waive any and all claims for personal injury and/or damage that I may have against the Hamilton Cycling Club including its executive officers, members or representatives for any and all injuries received while taking part in any and all activities organized, sponsored or sanctioned by the Hamilton Cycling Club.

Please make your remittance payable to The Hamilton Cycling Club and mail along with your Release, Waiver, Assumption of Risk & Indemnity form(s) (on the web) to:

Ken Wilson, 69 Symphony Place, Ancaster, ON L9G 4V6