



Elmhurst Bicycle Club

Member Activity Sheet

EBC Release & Liability Waiver

For liability protection and insurance purposes, it is the policy of the Elmhurst Bicycle Club ("EBC") to require all of its members to sign the Release and Liability Waiver which is a part of the EBC Membership Application. Guests of the EBC (which term includes all non-members of the EBC) who wish to participate in any EBC activity **must** sign the equivalent release and liability waiver contained on the **Guest Activity Release & Waiver** before the activity starts.

Any guest refusing to sign the release and liability waiver may **not** participate in the activity.

Should the activity continue, however, with the participation of the non-signing guest, the activity will no longer be considered to be an EBC-sponsored or sanctioned activity.

Activity Participants must:

- wear helmets on every ride;
- not wear headphones or ear-buds, as this is prohibited by Illinois Vehicle Code;
- not ride more than 2 abreast except as traffic and road conditions permit;
- PRINT their name, along with an In-Case-of-Emergency (I.C.E.) contact number, on this form.

Activity Leaders must:

- scan and e-mail this form to: MemberMiles@ElmhurstBicycling.org within 7 days of the event;
- limit this sheet to one (1) event only.

Activity Name: _____ Date: _____

Leader: _____ Miles: _____

| PRINT Name | I.C.E. Name I.C.E. Phone# | ...or ID location | PRINT Name | I.C.E. Name I.C.E. Phone# | ...or ID location |
|------------|------------------------------|-------------------------|------------|------------------------------|-------------------------|
| 1 | - | - | 13 | - | - |
| 2 | - | - | 14 | - | - |
| 3 | - | - | 15 | - | - |
| 4 | - | - | 16 | - | - |
| 5 | - | - | 17 | - | - |
| 6 | - | - | 18 | - | - |
| 7 | - | - | 19 | - | - |
| 8 | - | - | 20 | - | - |
| 9 | - | - | 21 | - | - |
| 10 | - | - | 22 | - | - |
| 11 | - | - | 23 | - | - |
| 12 | - | - | 24 | - | - |



Elmhurst Bicycle Club

Guest Activity Release & Waiver

Activity Guests (all club non-members) must:

- please read, complete and sign this Release & Waiver before participating in an EBC Activity;
- **wear helmets on every ride;**
- not wear headphones or ear-buds, as this is prohibited by Illinois Vehicle Code;
- not ride more than 2 abreast except as traffic and road conditions permit;

Activity Leaders must:

- scan and e-mail this form to: MemberMiles@ElmhurstBicycling.org within 7 days of the event;
- limit this sheet to one (1) event only.

The following is a Release, and waives your rights in the event of your injury and/or death.

By participating on this Elmhurst Bicycle Club activity, including, if applicable, transportation to and from same, I do hereby for myself, my heirs, executors and administrators, Release, Waive, and Forever Discharge, the Elmhurst Bicycle Club, it's officers and members, from any and all claims, demands, actions, or liabilities on account of any injury to me with may occur from any cause whatever, including negligence, on the part of anyone released hereunder, during my participation in or transportation to or from this activity.

I acknowledge that I am aware of the risks and hazards inherent upon engaging in this activity and do so entirely upon my own initiative, risk and responsibility.

I further understand that the club depends on its members to help it provide and lead club activities and that those members are relying on the protection afforded hereunder.

I hereby further agree:

- to participate in a manner that is safe to me and those around me;
- to observe all applicable safety regulations;
- and to conduct myself in a manner that will be complimentary to this activity.

I further acknowledge that I have read the forgoing release and waiver, understand it, including that it is intended to cover occurrences which may not yet have occurred, and which are unknown to me and, notwithstanding the forgoing, I sign it voluntarily with the full intent that it is forever enforceable.

| PRINT Name | Postal address | Phone # | E-mail address | I.C.E. Name <small>...or ID location</small> |
|------------|----------------|---------|----------------|--|
| SIGN Name | | | | I.C.E. Phone# |
| | | | | - - |
| | | | | - - |
| | | | | - - |
| | | | | - - |