Membership Application for New and Renewing Member
Every member must complete his/her own application.

CCBC membership is on a calendar year basis, Jan. 1 to Dec. 31 of each year. The fee is **$20.00.**

Please complete this form, make your check payable to the Coastal Cruisers Bicycle Club, **SIGN** the waiver clause, and mail both to **Bob Karapontso, 1051 Ohana Way, #207, North Port, FL 34289**. Processing your application will take one to two weeks and possibly longer in the summer when various staff members are "up north". We appreciate your patience.

Please print **Check one: New** _____ **Renewal** _____

Last Name	
First Name	Nickname, if any:
Address *(local address preferred)*	
City	
State	Zip:
Phone	
E-Mail	
Emergency Contact Name	
Emergency Contact Phone	

Liability Waiver*

I will bicycle with the Coastal Cruisers Bicycle Club on organized and scheduled rides entirely at my own risk. I certify that my health and physical ability will allow me to ride with no detrimental medical effect. Further, I will refrain from riding at a pace, style or distance which would put me at risk. I understand that bicycling involves physical risks and dangers of bodily injury and that 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 others. I will not hold Coastal Cruisers Bicycle Club, its officers, its ride leaders, or any member of the Club responsible for any accident resulting in injury, death, or damage to bicycle or property or negligence in rescue operations.

Signature: _____

***Note**: Your membership will not be processed without a signed application.*

Payment Information

For Member year	
Date (mm/dd/yyyy)	
Amount	$
Ck #	

Form Revised November 2018, S.Entlich, Printed 11/4/2018