

**FLORIDA FREEWHEELERS, INC.
MEMBERSHIP APPLICATIONS/RENEWAL**

This application is for:

- New Member Renewal

What type of ride might you volunteer to lead?

- A—20+ mph D—novice
 B—18-21 mph Tourist—35+ miles
 C—15-17 mph ATB

What type(s) of bike do you ride?

- Road Tandem
 ATB Recumbent
 Hybrid Other

What road ride lengths (miles) do you prefer?

- 10-20 30-50
 50-75 75+

Would you like your information listed in the club directory?

Name: Yes No

Email Address: Yes No

Phone Number: Yes No



Please print

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Emergency Contact _____

(name, relation, phone)

Family Members _____

Email Address _____

I understand that the Florida Freewheelers, Inc. are not insurers of my personal safety or liability during any Florida Freewheelers event or associated activity. I thus release them and agree to hold them harmless for any and all liability resulting from my participation. I agree to consent to permit emergency medical treatment as needed. I also agree that I will be fully responsible for any minor (under age 18) whom I bring to or allow at a Florida Freewheelers event. I further agree to follow all applicable traffic laws, conduct my activities in a safe and prudent manner, and TO WEAR A HELMET.

Signature _____ Date _____

Not valid unless signed

Signature _____ Date _____

For family membership, significant other must also sign

Send Check payable to:
 Florida Freewheelers, Inc.
 P.O. Box 121370
 Clermont, FL 34712-1370

Dues (Individual or Family):
 \$25 per year—electronic newsletter
 subscription (email address required)