

## JCBC Membership/Address Change Form

Name: \_\_\_\_\_  
(If this is a family membership, list all family members who want ID/discount cards)

Age: \_\_\_\_\_  
(Of oldest member)

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Waiver and disclaimer of Liability: I, the undersigned (a parent for riders under 18), accept that cycling is a hazardous activity and I accept all risks associated with participation in this event. I agree, that in the event of mishap during the ride that I will not hold the Johnson County Bicycle Club, its members or officers responsible for any injury, loss or inconvenience. I further agree to wear an ANSI or SNELL approved helmet and adhere to the rules of the road while riding in JCBC events.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Please Check:

- New Member
- Renewal
- Address Change Noted above (members)
- I would like to volunteer once this year to assist with a ride or other activity of JCBC.
- Please do not publish my name in the annual club member directory.
- Please send paper newsletter.

**Individual membership:        \$20**

**Family membership:            \$25**

(Family must reside at the same address)

Print this form, sign, and send with check

***Payable to JCBC***

**Mail to:  
Jim Coggins  
9513 Booth Ave.  
Kansas City, MO 64134**