



OAK PARK CYCLE CLUB

2009 MEMBERSHIP APPLICATION

Print out this application and mail it with payment to:

OPCC
P.O. Box 1488
Oak Park, IL 60304

Name: _____

Additional Names: _____

Street Address: _____

City State Zip: _____

Telephone: _____

E-Mail: _____

Single \$15 Family \$ 20.00
 New member Renewing member

In signing this release for myself and/or an applicant under the age of 18, I agree to absolve and hold harmless the Oak Park Cycle Club (OPCC), its officers and members, in any way whatsoever, for any injury, harm or loss suffered as a result of any activity associated with the Oak Park Cycle Club. I inspect my bicycle and keep it in reasonably good and safe riding condition for the rides. I consent to and permit emergency treatment in the event of injury or illness. I have an adequate and reasonable knowledge of what is prudent and safe bicycle riding and shall ride in that manner for my own protection and the protection of others. I am aware of and have knowledge of the State of Illinois Bicycle Rules of the Road.

Signature(s): _____

Date: _____

I would like to assist with:

Leading rides Website/database Programs
 Membership Special activities Other _____