

Carolinas Pace Line

Membership Application

Mail Application to:

Carolinas Pace Line

PO Box 950

Kings Mountain, NC 28086

Dues: \$10 Individual per year; \$15 Family per year

Name(s): _____

Address: _____

City: _____ State _____ Zip _____

Age (if under 18) _____

Phone _____

Email _____

Areas Of Interest/Specific Rides Participated in:

***Waiver**

I understand that participation in **Carolinas Pace Line (CPL)** activities is at my own risk and that CPL policy requires that I obey all traffic laws and wear an approved safety helmet. My participation in CPL activities constitutes my representation that I am able to operate my bicycle properly and that my bicycle is in good mechanical condition, and my acknowledgement that the officers and ride coordinators of the CPL cannot assume any liability for personal injury or property loss sustained during CPL activities. By my signature below, I fully release the CPL and those individuals from any liability, specifically including but not limited to liability for their negligent acts, stemming from or relating to past or future CPL activities or events.

I HAVE READ AND UNDERSTOOD THIS NOTICE AND RELEASE, AND INTEND TO BE LEGALLY BOUND BY IT.

Signature* _____ Date _____

*By Signing, I affirm that I am 18 years of age or older, or have listed my age above.

Memberships will expire December 31st of the year activated.