

BEBG GUEST CONTRIBUTION FORM

Contributions are yearly with renewals due by February 2nd. Contributions received after October 1st are valid for the following calendar year. Send completed form with your check, payable to **BEBG**, to:

Bill Creel
6549 126th Ave SE
Bellevue, WA 98006

I state that I wish to participate in activities offered by the Boeing Employees Bicycle Club (hereinafter referred to as "the Club"), a Boeing Recreation Club. I RECOGNIZE THAT ANY CLUB ACTIVITIES MAY INVOLVE CERTAIN RISKS AND DANGERS. I certify that I am aware of all the obvious and inherent risks of the Club's activities, including but not limited to: inadequate safety equipment, miscalculations, inexperience, improper training, equipment malfunctions, human error, accidents or illness in areas without medical facilities, the forces of nature, and the actions of any members, any participants or any other persons all of which may result in personal injury, death, property damage and other losses.

In consideration for the right to participate in the Club's activities, I HEREBY RELEASE THE CLUB AND THEIR DIRECTORS, OFFICERS, INSTRUCTORS AND MEMBERS AND THE BOEING COMPANY, ITS DIRECTORS, OFFICERS, AND EMPLOYEES FROM ANY AND ALL LIABILITY, CLAIMS AND CAUSES OF ACTION ARISING OUT OF OR IN ANY WAY CONNECTED WITH MY PARTICIPATION IN ANY OF THE CLUB'S ACTIVITIES. I PERSONALLY ASSUME ALL RISKS IN CONNECTION WITH THESE ACTIVITIES, AND FURTHER AGREE TO INDEMNIFY THE CLUB AND ITS DIRECTORS, OFFICERS, MEMBERS AND INSTRUCTORS, AND THE BOEING COMPANY, ITS DIRECTORS, OFFICERS, AND EMPLOYEES FROM ALL LIABILITY, CLAIMS AND CAUSES OF ACTION WHICH I MAY HAVE ARISING FROM MY PARTICIPATION IN CLUB ACTIVITIES. The terms of this agreement will serve as a release and indemnity agreement for my heirs, personal representative, and for all members of my family, including any minors. For my personal safety, I realize that I AM REQUIRED TO WEAR A HELMET on all Club rides, and that I must ride safely, legally and courteously.

I further state that I am eighteen (18) years of age or older and legally competent to sign this release that I understand these terms are contractual and not a mere recital, and that I have signed this document as my own free act. (Parents or legal guardians must sign for all persons under eighteen (18) years of age).

I have fully informed myself of the contents of this release and indemnity by reading it before I signed it.

By completing this form you knowingly and voluntarily provide personal information to the Boeing Employees Bicycle Club. Such information will only be used for club business.

NAME: _____ **SIGNATURE:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: (Home) (_____) (Cell): (_____) (Work): (_____) _____

E-MAIL ADDRESS: _____ **DATE:** _____

Please mail me a paper copy of the newsletter – Note: there is a \$10 surcharge for paper copies

Check One: **Individual (\$15)**
 Family (\$20)
 2 or more in family participate in club activities
 Renewal Only

Family members include: spouses, dependent children, and domestic partners

OTHER FAMILY MEMBERS (Who might participate): note for family members less than 18 years of age, a parent or guardian must sign

NAME	RELATION	SIGNATURE*

EMERGENCY CONTACTS (In case treatment needs to be authorized):

NAME	RELATION	PHONE	E-MAIL	MED ALERTS