



**The Info:**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone No. \_\_\_\_\_ Cel Phone No. \_\_\_\_\_ Birth date: \_\_\_\_\_

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

Ride Preference: MTB ROAD Level: BEGINNER INTERMEDIATE ADVANCED

Are you willing to lead a ride/rides? YES NO Days? \_\_\_\_\_

What would you most like to get out of your club membership? \_\_\_\_\_

Interest in racing? YES NO Have you raced before? \_\_\_\_\_ Category? \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

List any allergies, medications or other medical conditions: \_\_\_\_\_

**How to Join?** Purchase any Club Jersey (any style) at full retail (clearance items are not included) and fill out this Membership Application.

**The Agreement:** In signing this application, I agree to support and abide by all the rules and bylaws of the Bella Fiore Club for the duration of my membership. By purchasing the Club Jersey my membership is active and to maintain my benefits of membership, I will be invoiced for a \$25 annual fee each January. (Members joining in October, November or December will not be charged the first year).

My duties and membership obligations will include supporting, participating and attending events and activities as I am able. I will, to the best of my abilities, conduct myself in a professional manner and abide by the Bella Fiore General Rules and Bylaws while at Bella Fiore functions, rides, and events. This will also hold true whenever I am sporting a Bella Fiore jersey.

I release the Bella Fiore Club, Bicycle Emporium, its sponsors, and members from any and all liabilities due to injury or health related conditions resulting from cycling or racing while a member of Bella Fiore.

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

Payment Method: CA CK CC Date Paid: \_\_\_\_\_ Clothing Received: Y N BE Staff Initials: \_\_\_\_\_