

2019 Heart of Ohio Tailwinds Bicycle Club Membership

All memberships expire December 31 of each year.

Please mail to the address at the bottom of the page. Please complete the application and sign the release for all members of the family who wish to join. Signature of parent or guardian is required for each child under the age of 18 years.

By signing this release for myself or for the applicant under 18 years of age, I understand and agree to absolve all Heart Of Ohio Tailwinds Bicycle Club members, sponsors, organizers, and associated entities singly and collectively of all blame for any injury, misadventure, harm, loss, or inconvenience suffered as a result of taking part in any of the activities or gatherings of the Heart Of Ohio Tailwinds Bicycle Club.

Print Name	Birth Date, if child	Signature
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Date of Signature(s): _____

Street Address: _____ City: _____ State: _____ Zip: _____

Landline Phone: _____ Cell phone: _____ May we text you? Yes No

e-mail Address: _____

Are you a member of the Heart of Ohio Tailwinds Facebook group? Yes No

Do you use Strava? Yes No

I would be willing to help with:

Ride Leader or Routes HOT TAMALES Ride Other: _____

Dues: Individual: \$10 Married Couple \$15 Family \$20

*Amount Paid \$ _____

Payable to **Heart of Ohio Tailwinds Bicycle Club**
PO Box 176
Marion, OH 43301-0176