



New application ____

Renewal application ____

Are there changes in your information? ____

BRAMBA
BATON ROUGE AREA MOUNTAIN BIKING ASSOCIATION
MEMBERSHIP APPLICATION, ACKNOWLEDGEMENT & WAIVER

Date of Application: _____

Last Name: _____ MI: _____ First Name: _____ Date of Birth: _____

(Optional) Spouse/Other: _____

Address: _____ City: _____ State: _____ ZIP: _____

Home Phone: _____ Work Phone: _____ Email: _____

BRAMBA Annual Membership Dues: \$25

Contact us at bramba.club@gmail.com

Complete your annual membership online at shop.bramba.org
or mail a check. Please make check payable to BRAMBA.

Checks may be mailed to:

BRAMBA
PO Box 75313
Scotlandville, LA 70874

Please read and sign the waiver below:

In consideration of being allowed to participate in any way in BRAMBA activities, and any related events, trips, or rides, the undersigned:

1. Understand that mountain biking is a very strenuous physical activity and that the undersigned is in good physical health and condition to participate in the activity they have chosen without illness and has no adverse physical condition that would impair them on that activity.
2. Agree that prior to participating, they each will inspect their own equipment and if they believe anything is unsafe, they will not participate.
3. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inaction or negligence, but also the actions, inactions or negligence of others, the rules of play, or the condition of the premises or environment, or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
4. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
5. Release, waive, discharge and covenant not to sue BRAMBA, its officers, administrators, directors, agents, coordinators, or other volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers and owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "releasees" from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise.
6. Agree that the clauses of this Waiver are severable and not joint. Should any clause of the Waiver be found null in a court of law, that provision will be considered severed from the Waiver and the remainder of the Waiver shall be considered valid and binding.
7. This release pertains to the undersigned's voluntary participation in a BRAMBA event or ride.

THE UNDERSIGNED HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT THEY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY

PRINT NAME

SIGNATURE
