



# Major Taylor Cycling Club of Kansas City

PO Box 22451 Kansas City, MO 64113  
info@majortaylorkc.org

Membership is annual from the date application is received. Fill out the form below and mail it with your check made out to the **Major Taylor Cycling Club of Kansas City**. Mail it to the address above.

This application is for a \_\_\_\_\_ New membership \_\_\_\_\_ Renewal

**Membership type:** \_\_\_\_\_ Individual - \$25/year  
\_\_\_\_\_ Family - \$40/year

## Name(s) and Date of birth

Primary: \_\_\_\_\_ DOB: \_\_/\_\_/\_\_\_\_  
Secondary: \_\_\_\_\_ DOB: \_\_/\_\_/\_\_\_\_

## Address:

Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

## Phone(s):

Primary: Home: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ Cell: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_  
Secondary: Home: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ Cell: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

## Email:

Primary: \_\_\_\_\_  
Secondary: \_\_\_\_\_

## Accident Waiver and Release of Liability

In consideration of my membership with The Major Taylor Cycling Club of Kansas City, I do hereby waive myself, my heirs, my executors, administrators and assign all rights and claims for damages against The Major Taylor Cycling Club of Kansas City, its officers or members and assign for any and all injuries suffered by me while participating in any of The Major Taylor Cycling Club of Kansas City. I will be completely responsible for any minor child who joins MTCCCKC and any minor child that I bring to any scheduled activity. This waiver pertains equally to traveling to and from any scheduled activity.

***Helmets are required on all club rides.***

## Signatures:

\_\_\_\_\_  
primary date secondary date