



Name: _____

Address: _____ City: _____ Zip: _____

Phone: _____ Email _____

Membership:

Single (\$15) _____ Couple/Family(\$20) _____ Student(\$10) _____ Additional Donation _____

Indicate which activities you would be interested in participating:

- | | |
|--|---|
| _____ OCC Board of Directors | _____ Planning & Preparation of OCC Social Events |
| _____ Community Advocacy | _____ Weekday/Weekend Ride Leader |
| _____ Community Bike Safety Events | _____ Community Cycling Events (Tour de Titan) |
| _____ Technology Support (OCC Website) | _____ Bike Swap |

Waiver Agreement: I understand that the Oshkosh Cycling Club does not sponsor any group rides or events and is not responsible for any harm or misfortune that may occur to any person or property during any said group rides or ride events and thereby waive, release and dismiss all claims from damages and personal injury of which may occur during, before or after any such group ride or ride event, against the Oshkosh Cycling Club and all Oshkosh Cycling Club Members involved in such group bike rides or bike events.

Signature of Member _____

Signature of Parent or Guardian (if under 18) _____

Mail Registration with Check to:

Oshkosh Cycling Club
P.O. Box 3526
Oshkosh, WI 54903

Benefits of Membership with participation in 1 service event: (1) Discounts on accessories at all Oshkosh Bike Shops (2) Discounts on OCC apparel (3) Free admission to Spring Election party and fall party (4) Access to OCC website and club emails.

- _____ Membership card(s) issued
- _____ Email entered to database
- _____ Roster updated
- _____ Check Number
- _____ Cash