

**COASTAL BICYCLE TOURING CLUB MEMBERSHIP APPLICATION**

Dues should be paid January 1 of each calendar year. **Please submit a new application each year.** Individual membership fee is \$25.00. Family membership fee is \$30.00

MAIL TO: Amos Gallagher, CBTC Treasurer, 215 Atkinson Ave., Savannah, GA. 31401

OR EMAIL to [cbtc.org@gmail.com](mailto:cbtc.org@gmail.com)

INDICATE FORM OF PAYMENT:

\_\_\_\_\_ Check enclosed

\_\_\_\_\_ Payment made via PayPal

NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

SPOUSE (IF FAMILY MEMBERSHIP): \_\_\_\_\_

SPOUSE EMAIL ADDRESS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

**WAIVER:**

In consideration of my/our membership, I/We agree not to hold the Coastal Bicycle Touring Club (CBTC) or any of its members liable for any injury or damage, however caused, which may result from my/our participation in any club sponsored event.

I/we have read the above waiver and agree with its contents

SIGNATURE(S): \_\_\_\_\_

DATE: \_\_\_\_\_