



MOUNTAIN TOP CYCLING CLUB MEMBERSHIP FORM

\$25.00 INDIVIDUAL

\$40.00 FOR FAMILY

Name _____ Date of Birth _____

Mail address _____

Physical address _____

Home phone _____ Cell phone _____

Emergency Contact Name _____ Phone _____

Email Address _____

When joining the Mountain Top Cycling Club you agree to obey all traffic laws and act accordingly when representing the Mountain Top Cycling Club.

Make checks payable to MTCC

Applications can be mailed to :

Mountain Top Cycling Club

P.O. Box 843

Woodland Park, CO 80866

I have signed the Mountain Top Cycling Club waiver and release of liability Form on the back of this page.

Contact me by _____ I will be willing to volunteer _____

Signature _____ Date _____