

**Team Somerset 2012 Junior Development and Racing Cycling Program  
Registration Form and Release Waiver- One Step Form, includes Club Membership**

Please complete the form with all information below for each child you register. Fill out a separate form for each child. Mail the signed form with a check for \$150 payable "Somerset Wheelmen" to the address at the bottom..

**Participant information**

Name First/Last	School	Current Grade
Address	Birthdate (mm/dd/yy)	
City/State/Zip	Home Phone	
Email address	Cell phone	

**Parents information**

Father's Name	Mother's name
Bus/Cell phone	Bus/cell phone
Email address	Email address

**Medical information/Emergency contact**

Physician's name	Emergency contact:
Physician tel #	Bus/cell phone
Insurance carrier	Policy/Subscriber ID#
Any allergies, medical conditions?	Current medications:

Parent Participation is an important part of making the SSW junior development program a success. Please indicate where you can assist:

- Coach  
  Assistant coach  
  Sponsor  
  Administrative  
  Juniors Web site  
 Publicity  
  Clinics  
  General volunteer

**CONSENT FOR MEDICAL TREATMENT:**

As the parent or legal guardian of (name of registrant) \_\_\_\_\_, a minor, I hereby give consent for emergency medical care, if required, as a result of injury or illness that may occur during this activity. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of my dependent.

Signed (parent or guardian) \_\_\_\_\_ Date: \_\_\_\_\_

**WAIVER AND RELEASE OF LIABILITY:**

As the parent or legal guardian of (name of registrant) \_\_\_\_\_, a minor, I agree that in consideration of being allowed to participate in the Somerset Wheelmen Junior development program, I will waive any right legal or equitable, to claim damages for any loss to person or property occasioned by participation in such programs. I hereby release, discharge, hold harmless and/or otherwise indemnify the Somerset Wheelmen, its officers, agents, coaches and associated volunteer personnel, against any claim by or on the behalf of the registrant as a result of the resistrant's participation in the program. I fully understand the terms and conditions of this liability release and agree to adhere to the SSW code of ethics.

Mail Completed Form with Check for \$150\* payable to "SOMERSET WHEELMEN" to:

Doug Antelman, 12 Kingsridge Rd, Frenchtown NJ 08825

\*second child fee is \$60 additional.