



## 2010 Vantage Health Multisport Club Membership Form

Membership Dues are \$25 for the calendar year.

Return to: Vantage Multisport, 5306 Bon Aire Drive, Monroe, LA 71203

\*Name \_\_\_\_\_

\*Address \_\_\_\_\_

\*City, State and Zip \_\_\_\_\_

\*Race Age (according to licensing body) or Date of Birth: \_\_\_\_\_

\*Telephone (\*home and cell) \_\_\_\_\_

\*E-Mail Address \_\_\_\_\_

\*Interests (check all that apply):

Bike Road Racing  Triathlons  Duathlons  Recreational Cycling Running/Racing  
 Mtn Bike  Swimming  Volunteering  
Other \_\_\_\_\_

USCF Member? Yes \_\_\_\_\_ No \_\_\_\_\_  
Category Number: Road \_\_\_\_\_ Track \_\_\_\_\_ Official \_\_\_\_\_ Mechanic \_\_\_\_\_

NORBA Member: Yes \_\_\_\_\_ No \_\_\_\_\_ Skill Level: \_\_\_\_\_

USAT Member? Yes \_\_\_\_\_ No \_\_\_\_\_ License No \_\_\_\_\_

**\*These sections MUST be filled out. The others are optional but hey, why not fill them out also???**

**PLEASE READ:** All memberships are for the calendar year beginning January 1. All members wishing to race are strongly encouraged to obtain USCF, NORBA, USAT or other applicable licenses in order to compete in sanctioned events. Memberships in these organizations ensure that members will receive most regional race announcements, as well as official publications and insurance coverage in sanctioned racing events. All Vantage Multisport Club members are encouraged to purchase an article of club apparel which is available though the club as supplies allow. Club clothing is ordered periodically, usually is sold on a first-come, first serve basis.

In consideration of the acceptance of my application for membership, I hereby discharge any and all rights and claims of personal injury or property damage I may have against Vantage Multisport or any of its officers or agents, while participating in any activity promoted by Vantage Multisport Club. I understand and will abide by the posted Club rules and regulations and understand that violation of such rules may be grounds for my removal from the Club and Racing Teams.

Date: \_\_\_\_\_ Name: \_\_\_\_\_

Parent's Signature (if under 18): \_\_\_\_\_

**KNOW SOMEONE THAT MIGHT BE INTERESTED IN CLUB MEMBERSHIP??  
Please provide on this form their name, address, phone, email and/or their interest. THANKS!!!!**

**Name and Contact Information:** \_\_\_\_\_