

# APPLICATION



## Shul Boys Membership Application Packet 2016

Welcome new and returning Shul Boys members. You will find two documents enclosed:

1. Membership application
2. Waiver and release of liability form

### Levels of membership

1. **Basic Membership:** \$36
2. **Open Membership:** Pay any amount above \$36 which includes membership
3. **Mensch Membership:** \$90 which includes membership
4. **Macher Membership:** \$180 which includes membership

### **Printed Application Check List:**

Watch safety video (New members only) – [www.shulboys.com](http://www.shulboys.com)

Fill out membership application annually

Read and sign riding waiver annually

Choose membership level and if you want to mail a check: Make check payable to: SHUL BOYS MC

**OR:**

**YOU CAN ALSO FILL IT OUT ON YOUR COMPUTER AND EMAIL TO:**  
[IANABRAMS@ME.COM](mailto:IANABRAMS@ME.COM)

### **Instructions to fill out on your computer:**

1. Download Application Packet
2. Click in the first box to fill out your name; repeat for each box
3. Click Save & remember where you saved it to on your computer
4. Waiver & Release form: Enter in your name; date; and add your signature
5. Log into your email account, and add this as an attachment
6. Email to: [ianabrams@me.com](mailto:ianabrams@me.com)

### **Instructions to make payment online:**

1. Go to [shulboys.com](http://shulboys.com)
2. Click on the join tab
3. Scroll to the bottom, click on Donate
4. Enter in Payment amount
5. Click Submit

MAIL APPLICATION, WAIVER AND CHECK TO:

Michelle Schaefer  
Shul Boys MC  
26555 Richmond Road

# APPLICATION

SHUL BOYS JEWISH MOTORCYCLE CLUB MEMBERSHIP APPLICATION 2016		
APPLICANT INFORMATION		
<b>PLEASE CHECK ONE:</b>	<b>NEW MEMBER:</b> _____	<b>RENEWAL MEMBER:</b> _____
Last Name:	First Name:	Spouse/S.O.:
Address:		Spouse/S.O Email Address:
City:	State:	ZIP Code:
Home Phone:	Cell Phone:	Cell Phone Provider:
Email Address:		Gender: ___(M) ___(F)
Age: ___(21-30); ___(31-40); ___(41-50); ___(51-60); ___(60+)		Married: ___(Y) ___(N)
EMERGENCY CONTACT		
Name:		
Relationship:		Phone:
BASIC INFORMATION		
Are you insured? ___(Y) ___(N)		
What synagogue do you belong to? (optional)		
What is your occupation? (optional)		
MOTORCYCLE VALIDATION		
<b>Must have a valid motorcycle endorsement</b>		
Have you taken a Motorcycle Safety Course? ___(Y) ___(N)		When?
If yes, ___(Basic) ___(Advanced)	What kind of motorcycle do you ride?	
What are your average miles of riding per year?		
SIGNATURES		
I agree that I have watched the Safety First Video: ___(Y) ___(N) ___( I am a returning member) (found on the home page of shulboysmc.com)		
By signing below, I agree that the information I've provided to Shul Boys Motorcycle Club is correct and that the information will only be used for Shul Boys Motorcycle Club and not distributed to anyone who does not have a need to know.		
Signature:		Date:
Membership Type:	Check Amount:	Date

Please email/mail your signed membership form, release form, and check to: [ianabrams@me.com](mailto:ianabrams@me.com) OR Shul Boys Motorcycle Club  
c/o: Ian Abrams or Michelle Schaefer

26555 Richmond Road  
Bedford Heights, OH 44146

Please mail your signed membership form, release form, and check to:  
**SHUL BOYS MOTORCYCLE CLUB**

## **WAIVER AND RELEASE OF LIABILITY**

In consideration of the opportunity to participate in any ride or event, including meetings, which are sponsored by and/or conducted in whole or in part by the Shul Boys Motorcycle Club or the Jewish Motorcycle Alliance, along with each of their officers, directors, volunteers, members, and guests, hereafter collectively referred to as the **RELEASED PARTIES**, I on my own behalf and on behalf of my spouse, participating family members, heirs, personal representatives, successors and assigns, hereby release and hold harmless the Released Parties from any and all claims, demands, rights and causes of action of any kind whatsoever which I/we have now or may later have against the Released Parties in any way resulting from, arising out of, or in connection with their participation in, the performance of their duties or responsibilities and/or my involvement with/of any such event and/or from any claim that may arise from my/our participation in any ride or event.

This release applies to any kind of situation, whether it relates to negligence, conditions, instructions, rules or procedures related to the event. **I UNDERSTAND THAT BY SIGNING THIS, I AGREE THAT I WILL NOT SUE ANY OR ALL OF THE RELEASED PARTIES FOR ANY INJURY THAT MIGHT RESULT TO ME OR MY PROPERTY ARISING FROM OR IN CONNECTION WITH THE PERFORMANCE OF ANYTHING ASSOCIATED OR CONNECTED WITH THE SPONSORING, PLANNING, PARTICIPATION IN, OR CONDUCTING OF THE RIDE OR EVENT.** I represent that I am familiar with the operation of motorcycles and I fully understand that there are serious risks and dangers involved in motorcycling and motorcycle events. I will be voluntarily participating in any ride or event and I further agree and understand that I am assuming the entire and whole risk of any accidents or personal injuries or property loss, of any kind, including death or serious bodily injury, as a result of participating in any of the rides or events.

**ALSO, I AGREE NOT BRING ANY MINOR AS A GUEST TO A RIDE OR AN EVENT WHICH INVOLVES RIDING (A "RIDING EVENT") AND IF I, OR ANYONE ON BEHALF OF ME, OR MY SPOUSE, HEIR OR FAMILY MEMBER MAKES ANY CLAIM AGAINST ANY OF THE RELEASED PARTIES, I AGREE TO INDEMNIFY AND HOLD HARMLESS THE RELEASED PARTIES FROM ANY AND ALL CLAIM AND LITIGATION EXPENSES, ATTORNEY'S FEES, LOSS, LIABILITY, DAMAGE OR COST THAT THEY MAY INCUR DUE TO THE CLAIM BROUGHT AGAINST THEM. THIS MEANS THAT I WILL BE RESPONSIBLE FOR SEEING THAT THESE EXPENSES GET PAID.**

**I FURTHER AGREE TO WAIVE (GIVE UP) ANY RIGHTS THAT I MAY HAVE UNDER THE LAWS OF THE STATE OF OHIO, OR APPLICABLE STATES OR FEDERAL LAW WHICH MIGHT LIMIT OR VOID THE SCOPE AND/OR EFFECT OF THIS RELEASE AND INDEMNIFICATION AGREEMENT.**

**BY SIGNING THIS WAIVER AND RELEASE, I CERTIFY THAT I HAVE READ THIS ENTIRE WAIVER AND RELEASE, FULLY UNDERSTAND IT, AND THAT BY SIGNING THIS WAIVER AND RELEASE, I AM GIVING UP ALL RIGHTS THAT I MAY HAVE, BOTH ON BEHALF OF MYSELF, MY FAMILY MEMBERS, HEIRS, SPOUSES AND ASSIGNS, FOR CLAIMS AGAINST OR DAMAGES FROM SHUL BOYS MOTORCYCLE CLUB OR THE JEWISH MOTORCYCLE ALLIANCE, AND EACH OF THEIR OFFICERS, DIRECTORS, VOLUNTEERS, MEMBERS AND THEIR GUESTS, EVEN IF THERE HAS BEEN NEGLIGENCE ON ANY OF THEIR PARTS, IN CONNECTION WITH ANY RIDES, EVENTS OR OTHER RELATED ACTIVITIES. THIS WAIVER AND RELEASE SHALL CONTINUE IN FULL FORCE AND EFFECT NOTWITHSTANDING THE PERIODIC RENEWAL OR EXTENSION OF MY MEMBERSHIP IN THE SHUL BOYS MOTORCYCLE CLUB OR THE JEWISH MOTORCYCLE ALLIANCE, OR THE TERMINATION OF MY MEMBERSHIP OR PARTICIPATION IN THEIR RIDES AND EVENTS.**

**I UNDERSTAND THAT THIS MEANS THAT I, ON BEHALF OF MYSELF, MY SPOUSE AND MY LEGAL HEIRS, AGREE TO RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE RELEASED PARTIES FOR ANY DEATH, INJURY OR RESULTING DAMAGE TO MYSELF OR MY PROPERTY ARISING FROM OR IN CONNECTION WITH THE SPONSORING, PLANNING, PARTICIPATING IN OR CONDUCTING SUCH EVENTS. I HEREBY AGREE THAT THE ABOVE RELEASE, DISCHARGE AND COVENANT NOT TO SUE SHALL APPLY EVEN IF THE DEATH, INJURY OR DAMAGE IS CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASED PARTIES.**

**I FURTHER REPRESENT AND ACKNOWLEDGE THAT I AM PROPERLY LICENSED AND COMPETENT TO OPERATE A MOTORCYCLE IN A SAFE AND LAWFUL MANNER, THAT I WILL NOT BRING A MINOR AS A GUEST TO A RIDE OR RIDING EVENT, AND THAT I HAVE MOTORCYCLE LIABILITY INSURANCE IN AT LEAST THE MINIMUM AMOUNTS REQUIRED UNDER THE STATE OF OHIO FOR PRIVATE PASSENGER AUTOMOBILES.**

**I VOLUNTARILY EXECUTE THIS WAIVER AND RELEASE ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_**

Print Name \_\_\_\_\_

Signature \_\_\_\_\_