



LAKEVILLE CYCLING ASSOCIATION ANNUAL MEMBERSHIP 2021

MEMBER INFORMATION (name only for existing members):

Name/Company _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____

Email _____ Age _____

VOLUNTEER INTEREST/SUPPORT:

(circle all that apply)

What are your interests related to LCA and West Lake Marion Trail?:

Sponsorship/ Public Relations/ Advocacy *Event Planning*

Trail Building/maintenance *Other ideas* _____ ?

More ideas _____ ?

TRAILWORK DONATIONS

Members who donate 5 club sponsored trail-work sessions are comped for the annual renew fee, an individual can still elect to donate funds if desired.

MEMBERSHIP TYPE (circle one):

- LCA Member/Volunteer \$25
- Trail Worker Donation- 5 work sessions completed for the year
- LCA Junior member/Volunteer \$15
- Family membership \$50
- Super Supporter +\$50

Amount attached \$ _____

FINE PRINT: I understand that cycling is inherently dangerous and agree that I (including my heirs or successors of interest) will not hold LCA liable for any injuries I may sustain or property damaged I might incur during my participation.

Signature: _____ Juniors ONLY: _____

(parent/guardian)

SEND APPLICATION AND CHECK TO:

LAKEVILLE CYCLING ASSOCIATION

c/o Linda Jensen 19521 Iredell Court Lakeville, MN 55044