

TEXAS SPORT BIKE ASSOCIATION



AUSTIN • DALLAS • FT WORTH • HOUSTON
RIO GRANDE VALLEY • SAN ANTONIO

Texas Sport Bike Association San Antonio Chapter Membership Application

Name: _____

Home Address: _____

E-Mail Address: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Bike 1: Make, Model & Year: _____

Bike 2: Make, Model & Year: _____

Bike 3: Make, Model & Year: _____

Emergency Contact Name & Number: _____

I, _____, agree and accept any and all risks involved in the operation of a motorcycle. Furthermore, I understand that the TSBA and its members and officers do not assume any type of responsibility for my safety. By voluntarily choosing to participate in a TSBA event or ride, I do so strictly on my own assessment of my ability and equipment, as well as any other conditions that may apply. I hereby assume any and all risk and responsibility for myself, as well as any passenger. Also, I agree to release the TSBA and its chapters (including all officers and members) from liability for any injury and/or loss to my, or any passenger's, person or property, which may result from my participation in a TSBA event or ride. I also certify that both my vehicle and I are in full compliance with Texas state inspection and licensing requirements as well as any financial responsibility laws requiring insurance coverage.

Signature: _____

Date: _____

Initial here _____ if you DO NOT want your information listed on the password-protected "Members Only" web page.