



New Orleans Metro Area Mountain Bike Organization
MEMBERSHIP APPLICATION

NAME : _____
ADDRESS : _____
CITY : _____ STATE : _____ ZIPCODE : _____
E-MAIL ADDRESS : _____
TELEPHONE HOME : _____
CELL : _____
AGE : _____ GENDER : _____

I hereby apply for membership of the New Orleans Metro Area Mountain Bike Organization (NOMAMBO). I undertake to adhere to the rules of NOMAMBO as well as to the rules of IMBA, (International Mountain Bike Association). I understand that mountain biking can be dangerous and, on behalf of myself, my family and any personal representatives, I release and forever discharge NOMAMBO, its members, sponsors, promoters and any other person or organization involved with NOMAMBO from all and any liability, claim or cost to myself or my property arising directly or indirectly out of my traveling to, attendance at or participation in any activity of NOMAMBO. I irrevocably waive any claim which I may have against NOMAMBO or its members, officers, directors, and affiliates arising from any cause whatsoever, including gross negligence, which may arise from my traveling, attendance or participation as aforesaid. I certify that the above information is correct and that I have read and understand the contents.

Applicant's Signature : _____
Parent/Guardian's Name (If under 18) : _____
Parent/Guardian's Signature : _____
Date : _____

NOMAMBO annual membership dues are \$20.00 to be renewed annually.

Please mail application with check payable to:
NOMAMBO
C/o Eric Heyl
334 Madewood Dr.
Destrehan, LA 70047

