

HBA RACING TEAM

Hawkeye Bicycle Association
Cedar Rapids, IA

USCF club # 1690



Team Membership Application for 2010

Last Name	First Name	Middle Initial	USA Cycling License No.
Street Address			USA Cycling Category/Class
City	State	ZIP code	Racing Age (on Dec. 31, 2010)
Phone #	Internet E-Mail Address		Birth Date
Type of racing interested in: (Road, Time-Trial, Criterium, Track, Cycle-cross, Mountain) List all that you are planning to do.			Number. of years raced

	Size	Chest	Men		Waist	Women	
			Chest	Waist		Chest	Waist
Jersey, Short Sleeve.	Size _____	qty. _____	X	\$80	= \$ _____	XS	34-36 27-29 34-36 26-28
Jersey, Short Sleeve, Wm	Size _____	qty. _____	X	\$80	= \$ _____	S	36-38 30-32 36-38 28-30
Jersey, Long Sleeve.	Size _____	qty. _____	X	\$85	= \$ _____	M	38-40 32-34 38-40 30-32
Skin Suit.	Size _____	qty. _____	X	\$120	= \$ _____	L	41-43 34-36 41-43 33-35
Shorts.	Size _____	qty. _____	X	\$65	= \$ _____	XL	44-46 36-38 44-46 36-38
Shorts, Women	Size _____	qty. _____	X	\$65	= \$ _____	2XL	47-49 39-42 46-48 38-40
Bib Shorts.	Size _____	qty. _____	X	\$70	= \$ _____	3XL	50-52 42-45
Cycling Vest	Size _____	qty. _____	X	\$85	= \$ _____	4XL	53-56 45-48
Cycling Jacket	Size _____	qty. _____	X	\$125	= \$ _____		

Team Membership: (Includes Team T-Shirt) Size _____ \$ 25

Total \$ _____

WAIVER: I do hereby for myself, heirs, executors and administrators waive any and all claims for damages, and cause of action of every nature that I may have or which may hereafter accrue to me against the Hawkeye Bicycle Association and sponsoring agencies during participation in Association events, training or during travel to and from any Association event.

AGREEMENT:

1. I will use and display all Sponsor provided products when given to me.
2. I will never publicly down grade any Sponsors or their products. If I have a complaint I will talk to Race Director or go directly to the Sponsor.
3. In Signing this form I also agree to the HBA Racing Team Guidelines.

Signature of Applicant _____
Date

Signature of Parent or Guardian (If applicant under 18) _____
Date

To join racing team, send Application and check to:

Vern Rotert
HBA Racing Team
965 2 nd. St.
Marion, IA. 52302-2704

Phone. **(319) 377-5506**
Cell, **(319) 329-9297**
Internet E-Mail address: **varotert@aol.com**

HBA RACING TEAM

Hawkeye Bicycle Association
Cedar Rapids, IA

USCF club # 1690



Rules

The goal of the HBA racing team is to promote racing and all aspects of bicycling in the state of Iowa. To encourage, help and coach those who are new to the sport and new to bicycling.

A. General Rules:

1. The racing team shall consist of those age groups spelled out by USA Cycling rules.
2. The Team members will be limited to Cedar Rapids area at this time for budget reasons.
3. The racing team belongs to the HBA Club.
4. Discipline shall be carried out by a committee composed of the racing director, and assistant directors.

B. Rules for Individual Team Members:

1. Support the sponsors at every opportunity.
2. Wear team jersey at all races and club or team events if appropriate.
3. Obey the traffic laws when training.
4. Good conduct will be displayed at all events. Foster a professional image for HBA and the team.
5. The following procedure will be used when rules have been broken. Racing committee will meet and issue warning in writing. Second offense racing committee will take issue to the executive group for reprimand decision.
6. Rider is responsible for care and replacement of club equipment.
7. Racing team members are ***required to help with club sponsored events*** when asked.

C. Racing Sponsorship:

1. For scheduling of transportation, submit a tentative schedule for by the first of the month for races you are going to enter.
2. Entry fee reimbursement will be paid at a rate of 50%.
100% will be paid if you finish in top 3 of any USA Cycling event with 10 or more riders in your category.
Junior riders will have 100% reimbursement on all junior events.
3. Entry fees will be paid, retroactive after racing 10 USA Cycling Sanctioned races, if you finish or if sufficient reason is given for not finishing on your RACE REPORT.
4. You are responsible for getting your RACE REPORT to the racing director at the end of each month to qualify for reimbursements.
5. Refunds will be paid at the end of July and September.
6. If Monies runs out, you will be notified. Our sponsors are the teams source of revenue. Advertise for them every chance you can, and our budget will grow each year.
7. You are requested to ***race at all HBA sponsored races.***