

HBA RACING TEAM

Hawkeye Bicycle Association
Cedar Rapids, IA

USCF club # 1690



Team Membership Application for 2012

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, 2011)
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	Waist	Men		Women		
				Chest	Waist	Chest	Waist	Hip
Jersey, Short Sleeve, Men	Size ____ qty. ____ X \$80 = \$ ____	XS	34-36	24-26	32-34	24-26	32-34	
Jersey, Short Sleeve, Women	Size ____ qty. ____ X \$80 = \$ ____	S	36-38	26-30	34-36	26-28	36-38	
Jersey, Long Sleeve.	Size ____ qty. ____ X \$88 = \$ ____	M	38-40	30-34	36-38	28-30	38-40	
Skin Suit, Men	Size ____ qty. ____ X \$130 = \$ ____	L	41-43	35-38	38-40	30-33	40-42	
Shin Suit, Women	Size ____ qty. ____ X \$130 = \$ ____	XL	44-46	38-41	40-42	33-36	42-44	
Shorts, Men	Size ____ qty. ____ X \$70 = \$ ____	2XL	47-49	43-46	42-44	33-39	44-46	
Shorts, Women	Size ____ qty. ____ X \$65 = \$ ____	3XL	50-52	46-49				
Bib Shorts	Size ____ qty. ____ X \$75 = \$ ____	4XL	53-56	49-52				
Cycling Vest	Size ____ qty. ____ X \$85 = \$ ____							

Team Membership: \$20 \$ ____

**** clothing prices are subject to change ****

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 2nd. St.
Marion, IA. 52302-2704

Phone **(319) 377-5506**
Cell **(319) 329-9297**
Email **varotert@imonmail.com**

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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 racing team belongs to the HBA Club.
3. Discipline shall be carried out by a committee composed of the racing director, and assistant directors.

B. Rules for Individual Team Members:

1. Our sponsors are the team's source of revenue. Support them with your purchases and advertise for them whenever possible. Do not speak ill of any sponsor. If you have conflicts with a sponsor address them with the race director or the sponsor.
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.
8. A Google doc. Spreadsheet will be created for your use to facilitate transportation to races.
9. You are requested to **race at all HBA sponsored races.**

C. Race Entry Fee Reimbursement:

1. Entry fee reimbursement will be paid at a rate of 50%. You will be reimbursed at 100% if you finish in top three of any USA Cycling event with 10 or more riders in your category. Junior riders will have 100% reimbursement on all **junior** events.
2. Entry fees will be paid, retroactive after finishing ten USA Cycling sanctioned races. If you do not finish a race you start please list the reason on your RACE REPORT. Team sponsored races will count toward your ten race hurdle but will be reimbursed only if the team funds are sufficient to meet the reimbursement request for non-team sponsored races. We will only reimburse entry fees for USAC sanctioned events. You may submit your other, non-sanctioned, races on your RACE REPORT and we will consider reimbursement if there are available funds.
3. You are responsible for getting your RACE REPORT to the racing director at the end of each month to qualify for reimbursements which will be paid at the end of July and September. If we run out of money you will be notified immediately via e-mail.

