MID MICHIGAN CYCLING CLUB
RIDE SIGN-IN FORM

Date: _____ Time: _____ AM/PM Ride Level:_____

BY SIGNING IN ON THIS FORM I AGREE TO ALL MID MICHIGAN CYCLING CLUB MEMBERSHIP POLICIES AND STANDARDS AND RELEASE THEM AND ALL RESPECTIVE AGENTS FROM LIABILITY:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total distance ridden: _____ Miles Average MPH: _____

Any Incidents or problems during ride: _____

_____

_____

_____