

Franklin County Cyclists 2024 Membership Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Cell Phone: _____

Birthdate: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

I ride: ___ Road Bike ___ E-Bike ___ Gravel Bike ___ Recumbent/Trike

I want to be a part of the FCC community by....

___ Painting Routes

___ Being a SAG driver on a Tuesday evening

___ Helping at the Time Trial

___ Mentoring

___ Ride Manager (check riders in and out)

I promise to ALWAYS wear a helmet and NEVER wear ear buds while on a club ride.

Signature: _____ **Date** _____

2024 Membership fee is \$20

**Mail Application to FCC Membership Chair, 18603 Maugans Ave,
Hagerstown, MD 21742**