

NU Miners Mountain Bike Team REGISTRATION FORMS AND INFORMATION PACKET

Team Dues are tax deductible through YBONC Foundation tax ID: 26 – 1344243



Team Dues: \$350
NICA/League Fees: \$90
YBONC: \$40

- **Registration packets and ALL dues must be received prior to participating.**
- NICA/League fees (registration and races) are paid in NICA Pit Zone.
- Team Dues can be paid online at YBONC.org using PayPal/CC by selecting NU Miners MTB Team in the dropdown menu or tab, or use this QR Code ----->
- Or by check for \$350, payable to: **"YBONC - NU MTB"**, and write athlete's name



Deadlines....Drop off completed registration packets and Team Dues at:

- **October 8, 2021** - 2021/2022 Season Kick-off Orientation at Pioneer Park, Nevada City, 5:30-7:00pm
- **October 23, 2021** - 12Noon-2pm, Registration Event at You Bet! Bike Shop, Nevada City
- Or contact Adian Minty (captainadian@gmail.com) or Jessica Segers (jessica.segers@gmail.com) to make other arrangements.
- **Oct 30th** - New members, complete 2021 YBONC membership online at: <https://ybonc.org/membership/>
- **Jan 1st** - All members, complete 2022 YBONC membership online at: <https://ybonc.org/membership/>

Once your packet is processed, Parent/Guardians will receive an invite to the NICA Pit Zone and Student Athletes will receive an invite to the Team Snap mobile app. **No new riders accepted after Dec 1st.**
November 1st Monday is first practice. Practices are Mondays, Wednesdays, and Saturdays.

Below is your check-off list. The following forms are required for participation.

Forms – Signatures Required

- Contact Information and Survey
- Athlete Participation Guidelines
- Ride/Equipment Requirements
- Bike Check-In and Diagnostics
- Emergency Medical Protocol
- Medical Information, Proof of Insurance and Authorization to Treat
- Media/Photo Release Form
- NUHS Waiver of Liability, Release Assumption of Risk & Indemnity Agreement
- Youth Bicyclists of Nevada County Foundation (YBONC) Membership/Waivers
- NU Miners Mountain Bike Team Scholarship Application Form
- Local Bike Shop(s) Rules & Agreement
- Spin Studio Rules & Agreement
- NICA Covid-19 Coach Safety Message

Information

- Contact List
- Parents and Athletes – Information You Need to Know (2 Pages)
- NU Miners MTB Team Projected Costs (Team Expenses)
- Pre-Race Checklist
- NUHS MTB Club Constitution



NU MINERS MOUNTAIN BIKE TEAM CONTACT INFORMATION AND SURVEY

Please Print

Student Information:

Name		Grade (circle)				Gender (circle)	
		7 8 9 10 11 12				M F	
Primary Address			City		State	Zip	
Secondary Address (If Applicable)			City		State	Zip	
Home Phone No.		Cell No.		Email Address			
()		()					

Parent/Guardian Information: (Complete in the order we should contact in an emergency)

Relation**	Name	Email Address		
Cell Phone No.		Home Phone No.		Work Phone No.
()		()		()
Relation**	Name	Email Address		
Cell Phone No.		Home Phone No.		Work Phone No.
()		()		()
Relation**	Name	Email Address		
Cell Phone No.		Home Phone No.		Work Phone No.
()		()		()

** F-Father M-Mother GP-Grandparent U-Uncle A-Aunt LG-Legal Guardian FF-Family Friend

SURVEY

1. Are you currently a member of another sports team or extracurricular activity?
YES / NO If yes, please describe: _____
2. Do you have a mountain bike?
YES / NO If no, what is your height? _____
3. Do you currently have a helmet which complies with the CPSC safety standards (Look for a tag inside the helmet)?
YES / NO

Athlete Cycling Experience:

- New - Never Ridden I've done some trail riding/distance road riding I ride now, casually
 I ride a lot and have done some racing I train seriously and race a lot

Check Type(s) of Riding Experience:

- None Road MTB Enduro Downhill BMX Motorcycle

I have completed the above information providing comprehensive and accurate information.

Student Name (Print)

Signature

Date

Parent/Legal Guardian Name (Print)

Signature

Date

NU MINERS MOUNTAIN BIKE TEAM ATHLETE PARTICIPATION GUIDELINES

Regular and Consistent Attendance Is Required.

1. The Team Snap (mobile application) will be used to track attendance for required team functions.
2. It is the athlete's responsibility to log their attendance on Team Snap. If an athlete does not log their attendance, they will be considered absent.
3. Athletes can miss/be absent from **four (4)** team functions. This includes all scheduled team functions – team rides, spin classes, meetings, clinics, other training. If a team function is optional, it will be clearly stated as such. The mandatory period of attendance is December 1 through May 30.

There are no excused absences, except for the following:

- i. A long-term injury or illness with a note from doctor, or
 - ii. Participation in another sport/club that has a conflicting schedule (please explain below).
2. More than four (4) absences means they will be dismissed from the team.
 3. Showing up to a team function unprepared is unacceptable. Coaches can send athletes home from any team function if they are determined to be unprepared. This will count as an absence.
 4. Completed team registration packet and fee are required to be turned in prior to participating, or no later than December 1st. **No exceptions.**

If you have things which may conflict with our schedule, what are they and when?

I understand and agree to the above participation guidelines.

Student Name (Print)

Signature

Date

Parent/Legal Guardian Name (Print)

Signature

Date

NU MINERS MOUNTAIN BIKE TEAM RIDE/EQUIPMENT REQUIREMENTS

Please note that if you are not dressed appropriately, if you don't have water and food, and/or if you don't have the required equipment with you for the ride, you will NOT be allowed to ride with the team.

- Bike:** Your bike must be checked off by *Tour of Nevada City Bicycle Shop (TONC), You Bet! or Extreme Outfitters*. (See Bike Check-Off Form). This is for safety and to limit technical problems. Please make an appointment with the shop in advance, so as not to overwhelm them. This one-time service is for **FREE** for NU Miners MTB Team athletes.
- Helmet:** You must have a helmet that complies with CPSC safety standards. Look for a tag inside the helmet or ask one of the NU coaches if you are not sure.
If you're on your bike, your helmet must be on and buckled! NO EXCEPTIONS!
- Shoes:** You must have safe and functioning cycling shoes prior to your first ride with the team. If you have never used clipless pedals, don't worry, we will go over this with you. Just let a coach know prior to your first ride/skills day.
- Eye Protection:** Cycling glasses are recommended to protect your eyes from light, dirt, dust, rocks, branches, etc. Cycling glasses, with interchangeable lenses, are suggested. Regular sunglasses are not recommended due to unexpected light changes.
- Uniform:** Jersey tops and lycra or baggy cycling pants/shorts are required on all training rides and skills days. Jersey tops are important because they wick moisture away from your body. **NU Miners Team Kits (BOTH jersey and lycra or baggy shorts) are required to be worn at ALL RACES.**
- Water:** You must have 16 oz. of water per hour of ride time. Most standard bike bottles are 16 oz. CamelBaks® are acceptable and come in various sizes.
- Fuel:** Your body needs fuel: One Energy Bar and one Gel Pack per hour of ride time (or equivalent food source such as banana and sandwich).
- Tools:** You will be required to carry on you, or your bike:
[1] 2 Tubes (or 1 tube and a patch kit) [2] Pump [3] Tire Irons [4] Multi-tool
We highly recommend a multi-tool to include a chain tool, but it is not required. Spot checks will occur, and you will be sent home if you are missing tools/supplies. Equipment failures will happen and can put both the rider and the entire group at risk, such as causing the team to return to vehicles after dark on a team ride.
- Bike Light (LED):** Front and rear lights are required for weekday rides. **No exceptions.** The front light should be a minimum of 650 lumen; rear light needs to be high intensity flashing red.
- Hot/Cold Weather:** *On hot days*, bring sunscreen and plenty of water to avoid heat stroke, dehydration and sunburns. *On any day that is cold or rainy* you must have arm warmers or a jacket and leg or knee warmers. Hyperthermia onset can be rapid on a bike and can be very dangerous for both the rider and the group. Coaches retain the right to send any rider home who is under-prepared.

Please see any coach if you are unable to acquire any of the above items.

By signing this agreement, I have read and understand the above risks and equipment requirements, and make the commitment to participate in this season.

Student Name (Print)

Signature

Date

Parent/Legal Guardian Name (Print)

Signature

Date

NU MINERS MOUNTAIN BIKE TEAM

**Bike Check-In and Diagnosis: Tour of Nevada City
Bicycle Shop (TONC) or You Bet! or Extreme Outfitters**

Name of Rider	
Bike Make/Model	
Frame Color/Size	
Inspection Date	

Repair Check List:

CIRCLE	PART(S)	DESCRIPTION OF WORK NEEDED
OK NOT OK	Bike Frame	
OK NOT OK	Crankset	
OK NOT OK	Bottom Bracket	
OK NOT OK	Chain Rings	
OK NOT OK	Crank Bolts	
OK NOT OK	Pedals	
OK NOT OK	Chain	
OK NOT OK	Headset	
OK NOT OK	Stem & Bars	
OK NOT OK	Saddle & Seat Post	
OK NOT OK	Front Wheel:	
OK NOT OK	Tire / Tube	
OK NOT OK	Rim	
OK NOT OK	Spoke	
OK NOT OK	Hub	
OK NOT OK	Rear Wheel	
OK NOT OK	Cassette	
OK NOT OK	Front Brakes	
OK NOT OK	Rear Brakes	
OK NOT OK	Front Suspension	
OK NOT OK	Rear Suspension	
OK NOT OK	Front Derailleur	
OK NOT OK	Rear Derailleur	
OK NOT OK	Shift Levers	

Other Work Notes:

Bike Shop Supervisor's Name (Print)

Signature

Date

NU MINERS MOUNTAIN BIKE TEAM EMERGENCY MEDICAL PROTOCOL

Injury/Emergency	Protocol
Unconscious Patient (Momentarily or Sustained)	CALL 9-1-1
Life Threatening Injuries/Illness	CALL 9-1-1
Shock	Do not give any fluids or foods.
Spinal/Head Injuries	Do not move unless situation is life threatening (Open airway, vomiting, unsafe scene).
High Mechanism of Injury, Spine/Head	No releasing of spine. If a possibility of spinal injury (based on what happened and what hurts) CALL 9-1-1 and immobilize.
Not Breathing	If certified, perform CPR. Always start. Never stop unless unsafe, someone of equal or higher training takes over, or you become exhausted. CALL 9-1-1
Dislocations	Do not reduce.
Broken Bones	CALL 9-1-1 in most situations, especially serious fractures (CSM damage, femur, hip, pelvic, spinal injuries, rib fractures, open fractures, dislocations, etc.) If you splint, splint it as you found it. Do not traction into position angulated or open fractures unless radial pulse is absent. Do pull traction on a femur fracture while you are waiting.
Diabetic, Unconscious/Not Fully Conscious	Do not give sugar. CALL 9-1-1
Prescription Drugs, Life Threatening Situation	Help person take their own medication for a life threatening situation (asthma inhaler, EPI pen, etc.) Do not give someone's prescription drugs to someone else.

Additional Medical Protocols:

1. Do not give pain medications or similar while waiting for 9-1-1.
2. NO TOURNIQUETS.
3. No matter how minor the accident may seem, anyone involved in an accident will wait for a qualified adult to release the crash victim to resume activity. Crash victim should sit still while waiting for release to resume activity. Before releasing crash victim, the qualified adult should check the following:
 - i. Proper function of bike before resuming activity (brakes, chain, tires, etc).
 - ii. Helmet for performance and damage.

I have read and understand the above emergency medical protocols.

Student Name (Print)

Signature

Date

Parent/Legal Guardian Name (Print)

Signature

Date

NU MINERS MOUNTAIN BIKE TEAM

MEDICAL INFORMATION, PROOF OF INSURANCE AND AUTHORIZATION TO TREAT

To be filled out by the legal guardian. Please read and complete the information below:

Please check those that apply, and provide more information on the backside of this sheet if necessary.

My son/daughter is in good physical condition and mental health and is able to participate fully on the NU Miners MTB Team. He/she has **NO medical conditions**.

My son/daughter has the following **medical condition(s)** and/or **allergies** (food, drugs, insect bites, etc):

My son/daughter has asthma and will have an inhaler with him/her (required if prescribed by a physician).

My son/daughter is on the following prescription medication(s). Note which one he/she will be taking during team activities. Also, indicate if he/she is or is not able to self-administer these medications.

Date of Student's Last Tetanus Shot: _____ / _____ / _____

Insurance Provider: _____ **Policy No:** _____

Primary Physician Information

Physician's Name	Phone No.		
Address	City	State	Zip

Authorization for First Aid and Medical Treatment

1. I recognize that medical or dental care could be necessary for myself and/or my minor child during participation in team activities.
2. I hereby **appoint the certified NU MINERS MOUNTAIN BIKE TEAM Coaches as temporary guardian of my child** when he/she is participating in team activities for the purposes of arranging for or providing medical assistance.
3. I hereby **authorize the Coaches to arrange or provide my child with first aid, emergency care or other medical assistance** in the event of accident, illness or injury, including and without limitation helicopter evacuation, ambulance service, medication, hospitalization and surgery, and to execute such forms, consents and releases as may be appropriate, necessary or desirable under the circumstances.
4. I further authorize the **NU MINERS MOUNTAIN BIKE TEAM Coaches** to delegate medical treatment of my child to other persons at their sole discretion.
5. **I agree to pay for ALL expenses and costs associated with medical care, treatment and related transportation.**

I hereby acknowledge that ALL the information I have provided in this document is true, correct, and complete. I agree to update the form if necessary. I hereby acknowledge that I have fully read, understood and accepted each of the above provisions and voluntarily signed this agreement.

Parent/Guardian Name (Print)

Signature

Date

NU MINERS MOUNTAIN BIKE TEAM MEDIA/PHOTO RELEASE FORM

To be filled out by the legal guardian. Please read and complete the information below:

I, _____ (Parent/Legal Guardian Name), approve my son/daughter
_____ (Student Name) to participate in the NU MINERS MOUNTAIN
BIKE TEAM/CLUB, which participates in the NorCal HS MTB League.

Please check the appropriate line below:

_____ **YES**, I give my permission for the NU MINERS MOUNTAIN BIKE TEAM/CLUB, the NorCal HS MTB League and outside media agents (newspapers, television, etc.) to take photographs, video, and otherwise document my child involved in the activities of this program. I give permission for any photographs or video material of my child to be used in publicity about the program and organization (website, promotional materials, newspapers/magazine articles, etc.)

_____ **NO**, I do not give my permission for the NU MINERS MOUNTAIN BIKE TEAM/CLUB, the NorCal HS MTB League and outside media agents (newspapers, television, etc.) to take photographs, video, and otherwise document my child involved in the activities of this program. I do not give permission for any photographs or video material of my child to be used in publicity about the program and organization (website, promotional materials, newspapers/magazine articles, etc.)

Parent/Legal Guardian Name (Print)

Signature

Date

**WAIVER OF LIABILITY, RELEASE
ASSUMPTION OF RISK & INDEMNITY AGREEMENT
FOR THE NU MINERS MOUNTAIN BIKE TEAM/CLUB**

It is the purpose of this agreement to exempt, waive and relieve releases from liability for personal injury, property damage, and wrongful death, including if caused by negligence, including if the negligence, if any, of releasees. "Releasees" include the Nevada Union High School Mountain Bike Club/Team ("NU MINERS MOUNTAIN BIKE TEAM"), the Nevada Joint Union High School District, Nevada Union High School, Sweat Studio, the NorCal High School Cycling League ("NorCal") and its affiliate associations, local associations, member teams, event hosts, other participants, coaches, officials, sponsors, advertisers, and each of them, their officers, directors, agents and employees. The definition of the Nevada Joint Union High School District includes but is not limited to its Governing Board of Trustees, officials, employees, agents and representatives.

For in consideration of the undersigned participant's registration with the NU MINERS MOUNTAIN BIKE TEAM, its affiliates, local associations and member teams, and being allowed to participate in the NorCal events and member team activities and practices, participant (and the parent(s) or legal guardian(s) of participant, if applicable) waive, release and relinquish any and all claims for liability and cause(s) of action, including for personal injury, property damage or wrongful death occurring to participant, arising out of participation in the NU MINERS MTB Club/Team events, member team activities, the sport of mountain biking, and/or activities incidental thereto, whenever or however they occur and for such period said activities may continue, and by this agreement any such claims, rights, and causes of action that participant (and participant's parent(s) or legal guardian(s), if applicable) does(do) so on behalf of my/our and participant's heirs, executors, administrators and assigns.

Participant (and participant's parent(s)/legal guardian(s), if applicable) acknowledge, understand and assume all risks relating to mountain biking and any member team activities, and understand that mountain biking and member team activities involve risks to participant's person including bodily injury, partial or total disability, paralysis and death, and damages which may arise therefrom and that I/we have full knowledge of said risks. The risks and dangers may be caused by the negligence of the participant or the negligence of others, including the "releasees" identified below. I/We further acknowledge that there may be risks and dangers not known to us or not reasonably foreseeable at this time. Participant (and participant's parent(s)/legal guardian(s), if applicable) acknowledge, understand and agree that all of the risks and dangers described throughout this agreement, including those caused by the negligence of participant and/or others, are included within the waiver, release and relinquishment described in the preceding paragraph. I/We agree to abide by and be bound under the rules of By-Laws of the organizations and the arbitration clause provisions, as currently published. Participant (and participant's parent(s)/legal guardian(s), if applicable) acknowledge, understand and assume the risks, if any, arising from the conditions and the use of bike trails and related premises and acknowledge and understand that included within the scope of this waiver and release is any cause of action (including any cause of action based on negligence) arising from the performance, or failure to perform, maintenance, inspection, supervision or control of said areas and for the failure to warn of dangerous conditions existing at said trails, for negligent selection of certain releasees, or negligent supervision or instruction by releasees.

If the law in any controlling jurisdiction renders any part of this agreement unenforceable, the remainder of this agreement shall nevertheless remain enforceable to the full extent, if any, allowed by controlling law. This agreement affects your legal rights, and you may wish to consult an attorney concerning this agreement. Participant (and participant's parent(s)/legal guardian(s), if applicable) agree if any claim for participant's personal injury or wrongful death is commenced against releasees, he/she shall defend, indemnify and save harmless releasees from any and all claims or causes of action by whomever or wherever made or presented for participant's personal injuries, property damage or wrongful death.

Participant (and participant's parent(s)/legal guardian(s), if applicable) acknowledge that they have been provided and have read the above paragraphs and have not relied upon any representations of releasees, that they are fully advised of the potential dangers of mountain biking and understand these waivers and releases are necessary to allow mountain biking to exist in its present form. Significant exclusions may apply to mountain biking's insurance policies, which could affect any coverage. For example, there is no liability coverage for claims of one rider against another rider.

Parent/Legal Guardian Name (Print)

Signature

Date

**COMPLETE ONE WAIVER FOR EVERY RIDER and RIDE LEADER
YEAR: 2021/2022 Season**

Circle: **CLUB/TEAM RIDER** **COACHING STAFF FAMILY/LEGAL GUARDIAN**

WAIVER AND RELEASE OF LIABILITY - READ BEFORE SIGNING

In consideration of being allowed to participate in any way Youth of Bicyclists of Nevada County (YBONC) Foundation organization and established school bike club programs, its related events and activities, I, _____, the undersigned, acknowledge, appreciate, and agree that: (PRINT PARTICIPANT'S FIRST & LAST NAME)

1. The risk of any injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment and personal discipline may reduce this risk, the risk of serious injury does exist, and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, or others, and assume full responsibility for my participation; and,
3. I willingly to comply with the stated and customary terms and conditions for participation. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Company immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, IDEMNIFY, AND HOLD HARMLESS THE YBONC FOUNDATION organization, their board officers, officials, members, agents and/or employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used for the activity ("Releases"), WITH RESPECT TO ANY AND ALL INJURY DISABILITY, DEATH, or loss or damage to a person or property associated with my presence or participation. WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTIONS OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X _____ Age: _____ Date Signed: ____/____/____
(PARTICIPANT'S SIGNATURE)

FOR PARENT/LEGAL GUARDIAN IF PARTICIPANT'S OF MINORITY AGE

This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releases, and myself, my child and our heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releases from any and all liabilities incident to my minor child's involvement or participation in these programs as provide above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

X _____ Date Signed: ____/____/____
(PARENT/LEGAL GUARDIAN SIGNATURE) (PRINT FIRST & LAST NAME)



TDS Enduro

Liability Release

Terms and conditions of participating in any and all activities on this property known as Osborne Hill and surrounding areas including property owned by Hansen Brothers Enterprises.

1. I acknowledge that mountain biking, racing Mountain Bikes, motorcycle riding, horseback riding, hiking, running are demanding tests of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include but are not limited to those caused by terrain, facilities, features, temperature, weather conditions, condition of the participant, equipment, vehicular traffic, actions of other people including but not limited to, participants, volunteers, spectators, event officials and monitors and or producers of an event you are participating in. This includes all activities listed above whether participating in an event or at any other time you are on this property. I hereby assume all risks of participating in any activity listed above whether during an event or during any and all recreational use of this property.

2. I certify that I am physically fit, have sufficiently trained to participate in the activities listed above and have not been advised otherwise by a qualified medical person. I acknowledge that this accident waiver and release of liability will govern my actions and responsibilities at any and all times I am participating in any and all the above listed activities whether during an event or not while on this property or adjacent property.

3. In consideration of my application and permitting me to participate in any of the above listed activities whether during an event or not, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive and release and discharge Ron Sanchez, Debbie Sanchez, Casey Sanchez, Carly Sanchez, and Tandie Sanchez event holders, event sponsors, volunteers, this property owner, other property owners, Hansen Bros. Enterprises, Brian Broglio, spectators, sponsors, medical staff, volunteers, and other participants from any and all liability from my death, disability, personal injury, property damage, property theft, lost income, or any other losses, costs or actions of any kind which hereafter may accrue. (B). Indemnify and hold harmless the persons or entities listed in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of my actions while participating in the above listed activities weather during an event or during recreational times.

IMPORTANT! The property owner does not provide insurance coverage for participants of the above listed activities in the case of an injury whether during an event or not. The costs related to those injuries are the responsibility of the individual participant.

4. This AWRL shall be construed broadly to provide a release and waiver to maximum extent permissible under applicable law. I hereby certify that I have read this document and I understand its content.

5. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and or illness during this event.

6. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and or assigns.

Printed name of participant:

Signature of participant:

Signature of parent guardian for minors under the age of 18:

Date _____

Rev. 03/2020

NU MINERS MOUNTAIN BIKE TEAM SCHOLARSHIP APPLICATION FORM

We are committed to making our program accessible to everyone, regardless of their financial situation. If you require financial assistance, please complete the following information. We will review your application and get back to you as soon as possible about the level of scholarship we are able to offer to you.

Student Information:

Name		Grade (circle)					Gender (circle)		
		7	8	9	10	11	12	M	F
Primary Address			City			State	Zip		
Home Phone No.	Cell No.	Email Address							
()	()								

In the space below, please describe your current financial situation, indicating why you are in need of financial support to participate on the mountain bike team. Please use the backside of this sheet if more space is needed.

Due to the limited nature of our scholarship funds, we rarely give full scholarships, but ask that families pay what they can. If there is a financial hardship, please see the coaching staff.

NU MINERS MOUNTAIN BIKE TEAM LOCAL BIKE SHOPS RULES & AGREEMENT

Tour of Nevada City Bicycle Shop (TONC), You Bet! and Extreme Outfitters generously offer their support to the NU MINERS MOUNTAIN BIKE TEAM by giving all active team members a **10% merchandise discount** on parts, equipment, clothing, and accessories. Discounts on bikes may also be available. Once you have completed and turned in your registration packet and paid your fees your name will be added to the roster and a copy will be given to **TONC, You Bet! and Extreme Outfitters** for their verification of members.

- **Please call the bike shop(s) before** bringing in your bike for inspection or service to make sure they can accommodate you.
- Out of respect for the mechanics and the shops, **ALWAYS bring in a CLEAN bike!**
- Be polite and patient and show your appreciation.

We encourage all members to make the generosity and quality of *our local bike shops* known to the community!

Student Name (Print)

Signature

Date

Parent/Legal Guardian Name (Print)

Signature

Date

NU MINERS MOUNTAIN BIKE TEAM SPIN STUDIO RULES & AGREEMENT

During the late fall/winter months we often have to cancel practice due to inclement weather. When a practice ride is canceled the make-up practice will be held the following day (Tuesday or Thursday) at Sweat Studio in Grass Valley.

This type of schedule change will be communicated through Team Snap directly from a Head Coach.

We are invited guests and have been offered services at a discounted rate. Please treat the studio, equipment, Sweat Studio staff, and gym members with kindness and respect. Please make sure your **shoes are CLEAN** prior to arriving at the studio, and you help clean up after practice. Let's leave the studio as we found it when we arrived. No exceptions.

Sweat Studio-ASSUMPTION OF RISKS. I understand that while Service Provider has undertaken reasonable steps to lessen the risk of transmission of COVID-19 in connection with the Services, Service Provider is not responsible in any manner for any risks related to COVID-19 in connection with the Services. I understand that the World Health Organization has classified the COVID-19 outbreak as a pandemic. I further understand that COVID-19 is a highly contagious and dangerous disease, and that contact with the virus that causes COVID-19 may result in significant personal injury or death. I am fully aware that participation in the Services (including any related travel) carries with it certain inherent risks related to COVID-19 transmission ("Inherent Risks") that cannot be eliminated regardless of the care taken to avoid such risks. Inherent Risks may include, but are not limited to, (1) the risk of coming into close contact with individuals or objects that may be carrying COVID-19; (2) the risk of transmitting or contracting COVID-19, directly or indirectly, to or from other individuals; and (3) injuries and complications ranging in severity from minor to catastrophic, including death, resulting directly or indirectly from COVID-19 or the treatment thereof. Further, I understand that the risks of COVID-19 are not fully understood, and that contact with, or transmission of, COVID-19 may result in risks including but not limited to loss, personal injury, sickness, death, damage, and expense, the exact nature of which are not currently ascertainable, and all of which are to be considered Inherent Risks. I hereby voluntarily accept and assume all risk of loss, personal injury, sickness, death, damage, and expense arising from such Inherent Risks. Furthermore, I represent and warrant that I do not suffer from any medical condition or disease that might in any way hinder or prevent me from receiving the Services, including, to my knowledge, COVID-19.

This COVID-19 Assumption of Risk, Release, and Waiver of Liability Agreement ("Agreement") shall be binding on my heirs, executors, administrators, successors, and assigns. I expressly agree that this Agreement is intended to be as broad and inclusive as is permitted by applicable laws, and that if any portion of this Agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect. This Agreement contains the entire understanding of the parties relating to the subject matter, and shall not be altered, modified, amended, waived or supplemented in any manner whatsoever except by a written agreement signed by both parties hereto or their duly authorized representatives. This Agreement may be executed, made and delivered electronically.

Student Name (Print)

Signature

Date

Parent/Legal Guardian Name (Print)

Signature

Date

NICA COVID-19 Coach Safety Message

More info on COVID19 safety and guidelines can be found at www.norcalmtb.org

Be a good teammate

- Following this guidance makes you a good teammate, reduces the chance of your teammates getting COVID-19 and will reduce the chance your team practice will need to pause.
- **Stay home**
 - If you have been exposed to anybody with symptoms or in contact with anyone who has had a positive COVID test in the past 14 days, stay home.
- **Stay in contact**
 - Complete the Team Snap Health Check-in before attending practice rides.
 - Let your coach know about any potential exposure you may have had with anyone who has COVID symptoms or has tested positive for COVID before, during, or after practice.
- **Stay healthy**
 - If you develop or are having any of the following symptoms prior to, while at practice, or after practice, let your coach know. If you have any symptoms, stay at home.
 - Fever
 - Sore Throat
 - Shortness of breath or difficulty breathing
 - Muscle Pain
 - Nausea
 - New loss of taste or smell
 - Cough
 - Vomiting
 - Unexplainable Rash
 - Chills
 - Diarrhea
- **Stay away**
 - Practice physical distancing- stay 6 feet away from coaches and teammates. Give plenty of room when passing or allowing others to pass. Plan ahead for stopping areas to maintain distance.
- **Stay covered**
 - Always have your mask ready to put-on. **Foot down, mask up.**
- **Stay solo**
 - Be prepared, you will not be able to share equipment-- make sure your bike is working properly, bring all the water, tools, pumps, tubes, snacks, and anything else you need to be self-sufficient on the trail.
- **Stay small**
 - Before and during rides, gather in small groups with consideration for group size limits. As possible, keep the same groups for the season.
- **Stay clean**
 - Wash your hands, use hand sanitizer often, avoid touching your face, keep your bike and other equipment sanitized. If you need to use a public restroom or any public facilities, be quick and avoid touching any surfaces or fixtures as much as possible. Use hand sanitizer immediately afterward.

Student Name (Print)

Signature

Date

Parent/Legal Guardian Name (Print)

Signature

Date

2021/2022 Season
NU MINERS MOUNTAIN BIKE TEAM
CONTACTS AND COMMUNICATION

Coaching Staff:

Name	Status	Email	Phone No.
Jon Pritchett	Head Coach	doctorpritchett@hotmail.com	(530) 470-3253
Adian Minty	Coach	captainadian@gmail.com	(707) 696-8873
Ty Zwick	Coach	tyzwick@gmail.com	(530) 205-8637
Bill Segers	Coach	billsegers@gmail.com	(530) 615-7900
* Eric Mayer	NU Advisor	emayer@njuhsd.com	

Parent Advisory Committee (PAC):

Name	Email	Phone No.
Jessica Segers, President	jessica.segers@gmail.com	(530) 798-6106
Ty Zwick, Treasurer	tyzwick@gmail.com	(530) 205-8637
Open		
Open		
Open		

Team Communication:

Google Group Email	nuhsmtnbike (Contact Jessica to be added) <ul style="list-style-type: none"> • Team Announcements • Parent & Guardian Actions/Announcements • Volunteer Requests (Practices, Races, Events) • Send in Pics
Team Snap Mobile App	Nevada Union Miners Mountain Bike Team (Contact Adian for invite) <ul style="list-style-type: none"> • Team Chat • Rider Attendance & Health Check In • Practice Announcements/Information • Race Announcements/Information • Upload Pics

Organizations:

NICA	National Interscholastic Cycling Assoc.	https://www.nationalmtb.org/
NorCal	NorCal HS MTB Racing League	https://www.norcalmtb.org/
YBONC	Youth Bicyclists of Nevada County Foundation Jet Lowe, (530) 513-7852	https://ybonc.org/ yboncfdn@gmail.com
AirMedCare Network	AirMedCareNetwork (area coverage info, see last page) Sonja Conklin, (530) 648-6455	https://www.airmedcarenetwork.com/ sonja.conklin@gmr.net

PARENTS & ATHLETES – INFORMATION YOU NEED TO KNOW (pg. 1 of 2)

NJUHSD	Nevada Joint Union High School District
NUHS	Nevada Union High School
NU MTB	Nevada Union Miners Mountain Bike Team
NICA	National Interscholastic Cycling Association
NorCal	NorCal HS MTB Racing League
YBONC	Youth Bicyclists of Nevada County Foundation

Overview: Our program seeks to strike a balance between being a competitive individual and team sport while retaining some gentler recreation qualities. For athletes new to cycling, immediate into training, racing, and the pressure to perform may be intimidating. We create our team out of dedicated and enthusiastic riders. We have a proven history of creating capable and confident riders out of timid, out-of-shape beginners, year after year. Athletes who are already in good condition (like cross-country runners) adapt quickly and do very well.

We value and will promote excellence, believing that ordinary athletes can attain big results through setting goals, mapping a strategy, and giving the task disciplined effort. Many of the kids really work hard and are transformed by the process. Nearly every athlete (and parent/guardian) describes his/her level of experience, fitness, and personal ambitions. Groups are coed where practical.

Beginners, intermediate and advanced riders compete against peers of similar ability and experience. Each school's coach does his/her best to carefully place riders in the following NorCal HS MTB Racing League categories: freshmen, sophomore, junior varsity, and varsity. Riders are scored individually and on a team basis. The NorCal Series races are on Saturdays or Sundays, in Northern California, most a 1 to 4 hour drive away. Carpools will be available for all races.

Why cycling? Cycling is a great family-friendly fitness activity that can be done lifelong, with great social qualities. Groups of cyclist (except when climbing difficult hills) can talk, joke, and some even sing as they ride. They will become more interested in a healthy lifestyle, one that includes regular exercise, healthy eating habits and smart decisions regarding drug and alcohol use.

Training and racing with a team provides life lessons on self-discipline, teamwork and sportsmanship, along with the fitness and camaraderie. Some sports tend to favor certain body types, but cycling is different. The bicycle is an equalizer, showing little favor to any particular body type by adapting to each rider with correct frame sizing, adjustment of seat height and stem length.

Is Participating Dangerous? In mountain bike cross-country (MTB XC) races, the average speed is usually around 10 to 12 miles per hour. This is an endurance sport where the fittest athletes win. MTB XC is an inherently safe sport, particularly when compared with the high school contact sports. We do our best to minimize the risks to your athlete. The helmet rule is strictly enforced, and we teach each athlete bike-control skills early in the season to minimize the risk of crashing. Even with our best efforts, crashes and injuries may occur. NUHS requires all athletes in every sport to comply with certain athletic eligibility rules, including that the athlete have personal medical insurance. The team also purchases an additional high-deductible policy which supplements your personal policy and policies NorCal and YBONC carry.

Bike Racing is Female-Friendly: There are many females racing in the NorCal league series. In fact, female participation is the fastest growing demographic. Our own NUHS team culture is truly coed, and we do work hard to provide an experience that encourages and celebrates everyone's needs.

What to Eat: Athletes are expected to be informed and responsible with their eating habits. While this is not a weight-loss program, fat loss and increased lean muscle-mass are typical results of training you should expect. Your athlete will need more high quality calories from complex carbohydrates and will also need more protein than is required for a non-exercising lifestyle. An inadequate or junk food diet will put your athlete at a disadvantage against those who are eating to win. Do not use any of the popular "high this" or "low that" fad-of-the-month diets. Nutrition will be discussed more as the season progresses.

Parents and Other Ride Along: While training for bike racing is hard work, it's also great fun and the team sometimes ends rides with social time. You will discover that the other teams are full of delightful kids, with encouraging coaches and wonderfully supportive parents. At the races, the whole gallery of spectators cheer and ring cowbells not just for their own kids, but yours too! This is a very friendly sport. Parents are encouraged to join their athletes in training and even racing. Some of the races have adult divisions and your help is critical in helping the team travel to each venue. Last year, the coaches trained and raced alongside the student athletes. For those of us on the brink of sending their kids away to college and adult life, this is a special time to share. Many families who were introduced to the sport in this way describe the experience as incredible, eye-opening, and lifestyle-changing.

PARENTS & ATHLETES – INFORMATION YOU NEED TO KNOW (pg. 2 of 2)

How Communication Happens: We use Google Group email and Team Snap mobile app to communicate with parents and athletes throughout the season.

Please check your emails daily, late evening and early mornings for practice rides, race and travel info, etc.

About Commitment: If your athlete regularly misses practices/workouts, especially the weekend rides, he/she will not progress at the same rate as fellow athletes. This will become a source of frustration for your student once he/she starts having difficulty keeping up and will send a clear signal to others that he/she is not committed to the team. We promise to treat your athlete like a responsible young adult. Accordingly, we will interpret a habit of missed practices and a pattern of disinterest as a signal to be dropped from the team and email communication. If your athlete is unable to attend any of the agreed upon practice rides because of school homework, job schedules, family commitments or other concerns, it is really important that they consult with one of the coaches so we can create an alternative plan to keep the season on track. **Four (4) absences will result in a rider being removed from the team. (See Athlete Participation Guidelines.)**

Code of Conduct: We are committed to safety. We think about safety, teach safety and require each rider to always ride in a safe and controlled manner. Riders who repeatedly flaunt our safety rules or engage in behaviors that present unnecessary risk to themselves or others will be dropped from the program. As visible representatives of Nevada Union H.S. and ambassadors of cycling, athletes are expected to conduct themselves in a manner consistent with that status and follow all the rules outlined at all time. **If a team member is seen riding without a helmet at any time during the season, the rider will be removed from the team – NO EXCUSES.**

Personal Code of Conduct: How you behave as a representative of your team matters, both while participating in team activities and away. Any type of harassment, bullying, crude, or discriminatory behavior will not be tolerated. Depending on the severity of these acts, participants will be given a one-time warning, or be removed from the team immediately without reimbursement of team dues.

You'll Need Some Equipment: Your athlete will need an appropriate bike, cycling clothing, and other items. Please refer to the Ride/Equipment Requirements & Agreement list in your parent packet for this information.

Required Forms: Sports physicals are NOT required, but all forms in the Parent Packet must be completed and returned to the Coaches and fees paid before the athlete is able to ride with the team. Additional forms may be required during the season.

Bike Shop Discounts: As part of our sponsorships, student riders are able to purchase merchandise from the Tour of Nevada City Bicycle Shop, You Bet! and Extreme Outfitters at a 10% discount. Please refer to the Shop Agreement in the parent packet.

Community Support: The team is fortunate to receive financial support from many local businesses and organizations such as YBONC Foundation. Please show support and respect for your families, your school, our sponsors and our community by being a good citizen and trail steward.

Opportunities for Parent/Guardian/Community Member Volunteers: There is a consistent need for Parent/Guardian/Community Member Volunteers in order for the team and athletes to be successful. If you are interested in riding with or supporting the team as a mentor or leader, please contact Adian Minty. We would love to have mentors (both parents/guardians and more experienced HS riders) with many different skills sets for ride support or clinics. Additionally, there will be plenty of opportunity to help support the team with transportation, cooking, administration, and other operational needs. Please pay attention to the emails sent out and sign-up when asked.

NU MINERS MOUNTAIN BIKE TEAM
PROJECTED COSTS
 (Team Operating Costs are approximately \$10,000/yr.)

Amount	Required Team Expenses	Description
\$350 (Per Rider)	Team Dues	Team T-Shirt Team Campout Skills Clinic Team Equipment (trailer, trainers, pit tents, etc.) Sweat Spin Studio (discounted rate) Team Insurance NICA Coach Certifications NorCal League Team Registration Coach Wilderness Back Country/1 st Aid Certifications Coach /Ride Leaders DOJ Fingerprint Tests
\$90	NICA & NorCal League	Registration Fees (NICA=\$40, NorCal=\$50)
\$250	NorCal Races	5 Races (\$50 each)
\$40	YBONC Membership	Rider Insurance, CalStar Membership Discount Financial Services, California Raffle Permit Racer Pit Lunches, After Ride Snacks/Lunches
Approx. \$150	Race Kit	Short Sleeve Zip Jersey, Lycra/Chamois Shorts
Amount	Estimated Rider/Family Expenses	Description
Varies	Bike Maintenance (Student)	Bike, Tools, Lights, Parts, Repairs, Clothing
\$50	Race Nutrition	Water Bottles or Paks, Gu, Gels, Bars
Varies	Race Travel Expense	Fuel
Varies	Race Travel Expense	Food & Lodging @ Races
\$50	State Champion Race	1 Race (If Qualifies for State Championships)
Varies	Optional Team Gear	Baggy Shorts, L/S Jersey, etc.
\$15	Optional Team Gear	T-Shirt
\$45	Optional Team Gear	Sweatshirt

NU MINERS MOUNTAIN BIKE TEAM

Race Checklist

- Properly functioning and clean bike
- Directions to the race - can be found at norcalmtb.org
- League number plate and zip or twist ties
- Helmet
- Cycling shoes
- Cycling socks (two pairs - one for pre-ride, one for race)
- Glasses
- Team Jersey
- Team Shorts
- Knee/arm warmers (dependent on weather)
- Jacket/Rain jacket (dependent on weather)
- Gloves
- Pre-filled and labeled water bottles (at least two)
- Electrolyte mix for your bottles (optional, but recommended)
- Sun block
- Multi tool and chain breaker
- Quick link
- Spare tube
- CO2 inflator or pump
- Tire lever
- Race food/Post Race food (energy bars/blocks/sandwiches)
- Floor pump
- Towel/old blankets
- Plastic bag to put dirty clothes in
- Post-race clothing
- Sweatshirt
- Chain lube and rag
- Electrical Tape
- Sharpie
- Lock and Cable
- Ibuprofen/Tums
- Wipes/Toilet Paper
- Water and Soap (1 gallon jug)
- Chair/Blanket
- Park Pass and Money



Hi Riders,

I am your local AirMedCareNetwork (AMCN) Membership Manager, and I would like to wish you a fun, safe racing season. YBONC has partnered with AMCN to offer you air ambulance membership at the discounted rate of \$65 per year, covering everyone in the household, including undergraduate college students away at school. AMCN is the largest network of air ambulances in the United States, with 320 base locations in 38 states, including 37 bases in CA. Your local AMCN bases are CALSTAR-Auburn, CALSTAR-South Lake Tahoe, REACH-Marysville. AMCN is your local air ambulance provider for Grass Valley/Nevada City region. We offer three types of memberships, allowing you to choose the best fit for your family; 1) Emergent (911) and critical hospital to hospital transfers by air, 2) Domestic FlyUHome, hospital to hospital for recuperation air transport within the 48 contiguous states when hospitalized 150+ nautical miles from home, and 3) International FlyUHome, which includes all 50 US states and worldwide, when hospitalized 150+ nautical miles from home.

Air ambulance membership is important when we live, commute, and recreate in rural areas. Did you know that Nevada County does not have a trauma center, therefore most critical illnesses and traumas are transported by air to Sutter Roseville or UC Davis (pediatric & burn patients)? An AMCN membership assures you have no out of pocket costs for air medical transport by an AMCN provider, which includes copays, deductibles, co-insurance, remaining balance from maximum allowable coverage by insurance, even if your insurance denies payment of the bill by an AMCN provider.

Because you also race in Truckee/North Star area and Sierra/Plumas counties, I also recommend you enroll in Care Flight's air ambulance membership program. Care Flight is not a reciprocal partner of AMCN, therefore for the areas you ride you need two separate memberships. Care Flight also offers a membership for \$65 per year/per household, which covers their bases located in Truckee, Beckwourth, Reno, Fallon & Gardnerville. Air ambulances are dispatched by closest available, so in your racing area you need both AMCN and Care Flight memberships for full coverage.

Please don't hesitate to give me a call to explain in more detail and to assist with phone enrollment in both AirMedCareNetwork and Care Flight.

Sincerely,

Sonja Conklin
AirMedCareNetwork / GMR
CALSTAR / REACH / Care Flight Membership Manager
(530) 648-6455 cell
Sonja.conklin@gmr.net