

Appendix

SPYDER LYFE NATION - MEMBERSHIP PACKET

This **Membership Packet** is designed to gather essential information from prospective members, volunteers, and ambassadors, outline their responsibilities, and ensure everyone understands the terms and conditions associated with their involvement in **Spyder Lyfe Nation** (SLN) activities. This packet includes forms for Membership Application, Waiver and Release of Liability, Ambassador Duties Acknowledgment, and Volunteer Agreement, which are critical to maintaining clarity in expectations and responsibilities while providing legal protection for the organization.

By completing and signing these forms, you acknowledge your commitment to uphold the values of Spyder Lyfe Nation, actively participate in community projects, and adhere to our guidelines and safety protocols. Upon successful acceptance into SLN, you will receive a **SLN Member Handbook** that provides comprehensive information on our mission, activities, and the benefits of being part of the Spyder Lyfe Nation community.

Join us in riding with purpose and making a meaningful impact together!

Appendix A: Membership Application Form

MEMBER INFORMATION

Personal Information

- **Name:** _____
- **Phone #:** _____
- **Email:** _____
- **Address:** _____
- **City, State, Zip:** _____
- **Spouse/Partner:** _____
- **Phone #:** _____

Motorsport Information

- **Spyder Year & Model:** _____
- **Other Motorsport Vehicle:** _____

Emergency Contact

- **Next of Kin:** _____
- **Phone:** _____

Membership Type (Check One):

- **Full Membership** (\$120 Annual Fee)
- Associate Membership (\$60 Annual Fee)
- Volunteers/Non riders (Free)

By signing below, I acknowledge that I have read and understood the terms and conditions of the membership, including the non-refundable annual fee and the commitment to participate in community activities as per the membership type selected.

Signature: _____

Date: _____

Appendix B: Waiver and Release of Liability Form

RELEASE OF LIABILITY WAIVER

By signing this waiver, I acknowledge that motorcycle riding and touring can be hazardous and may result in serious injury or death. I understand that this activity, in which I am voluntarily participating, has inherent risks (including death, loss of limb, permanent disability, and damage to or loss of property) that I assume.

I agree not to sue SPYDER LYFE NATION, its agents, employees, officers, directors, managers, and representatives for any and all loss or damage, including property damage, personal injury, permanent disability, and/or death, arising out of my participation in any and all activities this Membership year. _____

I certify that I am duly licensed and competent to operate a motorcycle safely and that my vehicle is in safe and legal operating condition. I will adhere to all event requirements regarding the safe and legal operation of motorsport vehicles and agree that any violation will result in termination of my participation without recourse or refund.

I have read this liability waiver and agreement and am waiving any claim as set forth herein for myself, my spouse, personal representatives, assigns, heirs, and next of kin.

Printed Name: _____

Signature: _____

Date: _____

Appendix C: Ambassador Duties Acknowledgment Form

AMBASSADOR DUTIES

As a Spyder Lyfe Ambassador, I understand that conflict resolution, stakeholder collaboration, and community engagement are critical aspects of my role. I will approach conflicts within the community with professionalism, empathy, and respect, and I will work towards finding mutually beneficial solutions.

Ambassador Responsibilities Include:

1. Conflict Resolution:

- Approach conflicts with professionalism, empathy, and respect.
- Actively listen to community members and stakeholders to understand their concerns.

2. Stakeholder Collaboration:

- Actively seek opportunities to collaborate with local businesses, nonprofit organizations, educational institutions, and other stakeholders.

3. Community Engagement:

- Attend community events and activities, representing Spyder Lyfe and contributing to the community's well-being.

By signing below, I acknowledge that I have read, understood, and agree to fulfill the duties outlined above as a Spyder Lyfe Ambassador.

Signature: _____

Date: _____

Appendix D: SLN Volunteer Agreement Form

VOLUNTEER AGREEMENT

As a volunteer for Spyder Lyfe Nation (SLN), I understand that my role involves actively supporting the organization’s mission and contributing to community projects and events. I will uphold the values of SLN and perform my duties with integrity, dedication, and respect.

Volunteer Responsibilities Include:

1. Event Coordination:
 - Assist in planning, setting up, and coordinating events.
2. Documentation:
 - Volunteer to document activities through photography, videography, and written content.
3. Community Outreach:
 - Participate in community outreach programs and activities that promote the mission of SLN.
4. Follow Guidelines and Safety Protocols:
 - Ensure adherence to all guidelines and safety protocols during events and activities.

By signing below, I agree to volunteer for Spyder Lyfe Nation and fulfill the responsibilities outlined above. I understand that this is a voluntary position and that I will not receive any monetary compensation.

Printed Name: _____

Signature: _____

Date: _____