



cvskiclub.org

Membership Application

October 1, 2017 thru September 30, 2018

PLEASE PRINT LEGIBLY:

Member's Name: _____ Birth Date: _____

Family Members in Same Household:	Relationship:	Birth Date:
_____	_____	_____
_____	_____	_____

Home Address: _____

City: _____ State: _____ Zip: _____

Member's Phone No: (Home) _____ (Mobile) _____

Family Member's Phone No: (Home) _____ (Mobile) _____

E-mail Address: _____

(Please provide e-mail address to receive the club's newsletter 'CVSC SkiZette')

Emergency Contact: _____ Phone: _____

Address: _____

Membership Dues: *Yearly - October 1st thru September 30th*

\$50.00 Primary Member / \$20.00 Each Additional Family Member *in Same Household.*

Discount: *Membership Renewal discount if paid by October 31st with No Lapse in Membership.*

\$35.00 Primary Member / \$15.00 Each Additional Family Member *in Same Household.*

Check # _____ / Date: _____ / Amt Paid: _____

- Interested in Volunteering as our Club is only as Strong as its Volunteers?
 - Chair/Host Social Activity Committee Volunteer Phone Committee Other
- New Member; how did you hear about our club? _____
- New members joining after July 1st, membership is valid thru Sept. of the following year.

**YOU MUST READ AND SIGN THE RISK AGREEMENT
OR YOUR APPLICATION CANNOT BE ACCEPTED!**

Please send the membership application, the signed waver, and the dues to:

Maggie Jong, V.P. Membership
2597 Wellingham Drive, Livermore, CA 94551 / email: mozoro25@gmail.com
Make your check payable to the **Castro Valley Ski Club.**

RELEASE, WAIVER AND INDEMNITY AGREEMENT

In consideration of my being allowed to participate in CASTRO VALLEY SKI CLUB Events and Activities, I HEREBY AGREE AS FOLLOWS:

I HEREBY ASSUME ALL RISKS INVOLVED IN MY PARTICIPATION IN CASTRO VALLEY SKI CLUB EVENTS AND ACTIVITIES.

I HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the Club members, its officers, participants, promoters, sanctioning organization or any subdivision thereof, owners and lessees of the premises used to conduct said events, and each of them, all for the purposes herein referred to as “release” from all liability to the undersigned, his/her personal representative, assignees, heirs, and next of kin for any and all loss or damage on account in injury (including death) or property.

I HEREBY AGREE TO INDEMNIFY, DEFEND, SAVE AND HOLD THE RELEASEES, AND EACH OF THEM, HARMLESS from and against any and all claims, losses, damages, liabilities and fees (including attorney’s fees), damage to personal property, personal injury or death that any of them may incur as a result of, or relating to my participation at any event, and whether caused by the negligence of releasees or otherwise, and whether such claims, losses, damages, liabilities and fees (including attorney’s fees) including any personal injury or death are brought against me or any of the releasees.

EACH OF THE UNDERSIGNED FURTHER EXPRESSLY AGREES that the foregoing release, waiver and indemnity agreement is intended to be as broad and inclusive as is permitted by law in the State/Province in which the event is conducted and that if any portion thereof is held invalid it is agreed that the balance shall continue in full force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THIS RELEASE, WAIVER AND INDEMNITY AGREEMENT and further agrees no oral representations or inducements apart from the foregoing have been made.

I HAVE READ THIS RELEASE (ALL APPLICANTS MUST SIGN)
Parents or guardian must sign for those under 18 year of age.

(Signature) (Date)

(Signature) (Date)

(Signature) (Date)

(Signature) (Date)