

SNOWBOUNDERS SKI CLUB

MEMBERSHIP APPLICATION 2023/24

Required for new and renewal

PLEASE PRINT:	
NAME:	NAME:
ADDRESS:	(Spouse/partner)
CITY:	
HOME PHONE: ()	
WORK PHONE: ()	
CELL PHONE: ()	CELL PHONE: ()
E-MAIL ADDR:	E-MAIL ADDR:
BIRTHDAY: (MO/DAY/YR)/ B CIRCLE THE ABOVE INFORMATION Y	SIRTHDAY: (MO/DAY/YR)// YOU DO NOT WISH PRINTED IN THE CLUB ROSTER.
	OF CLAIMS, EXPRESS ASSUMPTION OF RISK AND INDEMNITY AGREEMENT
and activities, including, but not li	o participate in any way in the Snowbounders Ski Club programs, related events mited to, skiing, snowboarding, bicycling and all other activities and social
events, I/WE	(print name(s)), the ce, and agree that: the activities is significant, including the potential for permanent paralysis
serious injury does exist; and, 2) I KNOWINGLY AND FREELY ASSUME A THE RELEASEES and assume full respons 3) I willingly agree to comply wit I observe any unusual significant haz participation and bring such to the a 4) I, for myself and on behalf of HEREBY RELEASE AND HOLD HARMLESS SNOW Volunteers, and/or employees,("RELEAS TO PERSON OR PROPERTY, WHETHER CAUSED permitted by law. By executing this d conjunction with any injury, disabili of my engaging in such activities. 5) This agreement shall apply to an occurring at any time after the execu	the the stated and customary terms and conditions for participation. If, however, and during my presence or participation, I will remove myself from attention of the nearest official immediately; and, my estate, heirs, survivors, assigns, personal representatives and next of kin, MBOUNDERS SKI CLUB, their officers, directors, representatives, agents, (BEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGED BY ACTIVE OR PASSIVE NEGLIGENCE OF THE RELEASEES, to the fullest extent document, I agree to hold the RELEASEES harmless and indemnify them in ty, death, or loss or damage to person or property that may occur as a result may and all injury, disability, death, or loss or damage to person or property
x	DATE SIGNED
(Participant's Sign	ature)
X(Spouse/Partn	DATE SIGNED her)
NEW APPLICANTS : Please tell us how	you learned of our club llowing activities: ski trips: Socials: Meeting/Programs:
Publicity:	Car pool: Other: None:

NO MEMBERSHIP FEES - NEW OR RENEWAL

Mail to: Mike Reed, Membership Chairman

5827 E San Juan Drive Orange, CA 92869