



ORANGE COUNCIL OF SKI CLUBS

AFFILIATED MEMBERSHIP APPLICATION

CST #2083043-40

REQUIRED FOR NEW AND RENEWAL

PLEASE PRINT:

NAME: _____

ADDRESS: _____

CITY: _____ ZIP+4: _____

HOME PHONE: (____) _____

WORK PHONE: (____) _____

CELL PHONE: (____) _____

E-MAIL ADDR: _____

BIRTHDAY: (MO/DAY/YR) ____/____/____ (optional)

WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in The Orange Council programs, related events and activities, I _____ (print name), the undersigned, acknowledge, appreciate, and agree that:

- 1) The risk of injury from many of the activities is significant, including the potential for permanent paralysis and death...
2) I KNOWINGLY AND FREELY ASSUME ALL SUCH RISK, 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 willing agree 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 nearest official immediately; and,
4) I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS The Orange Council, their officers, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSON OR PROPERTY, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, in the fullest extent permitted by law.

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

X _____ DATE SIGNED _____
(Participant's Signature)

MEMBERSHIP FEES: \$20.00

office use:

Check # _____ /cash _____ \$ _____ Membership Card # _____

Recorded by: _____ (Form to be filed by Council Secretary)