SNOWCHASERS SKI CLUB



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children (Under d	age 21 & living at h	nome) Birthdate –	Month/Day/year	
Child				Child
offer assistance v club activity I par esponsible, shou	whenever possible. rticipate in and ho Id any mishap occ	te within the club to make I accept personal respons Id no member of the ski clu cur.	sibility for any liability Jb, board member, d	in any or locatio
X Signature				
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enewal Date: N	ovember 1st each	n year 🔲 Individual - \$30	Couples or Famil	ly - \$45
or Board Member	_	Amount Rec'd: \$ C		

Sign Liability Waiver (required)

Mail <u>Application/ Waiver form</u> & <u>Dues</u> to:

Karen Davis, 1080 San Miguel Rd. #117, Concord, CA 94518

SNOWCHASERS SKI CLUB

Release, Waiver, and Indemnity Agreement



In consideration of my being allowed to participate in Snowchaser Ski Club events and activities, I HEREBY AGREE AS FOLLOWS:

I HEREBY RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO FILE LAWSUIT against the club members, its officers, participants, promoters, sanctioning organization, or any subdivision thereof, owners and leases of the premises used to conduct said events, and each of them, all for the purposes herein referred to as "releases" from all liability to the undersigned, his/her personal representatives, assignees, heirs, and next of kin for any and all loss or damage on account of injury to person (including death) or property.

I HEREBY AGREE TO INDEMNIFY, SAVE AND HOLD HARMLESS the releases, and each of them, from any loss, liability, damage or cost they may incur due to the presence of the undersigned in any way while participating in any event and whether caused by the negligence or releases or otherwise for losses, damage (including attorney's fees) which may be brought against me or against any of them by anyone claiming to be injured (including death) as a result of any injury caused by me or injury to my or the claimant's property which may occur as a result of my participation.

I, THE UNDERSIGNED, FURTHER EXPRESSLY AGREE 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 to full force and effect.

I, THE UNDERSIGNED, HAVE READ AND VOLUNTARILY SIGN THIS RELEASE, WAIVER, AND INDEMNITY AGREEMENT and further agree no oral representations or inducements apart from the foregoing have been made.

	Date					
X Signature						
X Signature	Date					
EMERGENCY CONTACT – In case of emergency, contact:						
Name						
Home Phone () Cell Phone ()					
Address						