



Victoria Alpine Ski Club Membership Application

A Registered, non-profit organization Under the Societies Act of British Columbia

Membership Cost - \$50.00 year

Members must be 19 years of age or older

Name: (Print) _____ **Sex: F** ___ **M** ___

Birth Date: (dd/mm/yyyy) ___/___/____ **Membership Status: New** ___ **Renewal** ___

Address: _____

City: _____ **Postal Code:** _____

Email: _____

Telephone: (Home) () _____ **(Cell)** () _____ **(Work)** () _____

New Members: How did you hear about the Ski Club: _____

Emergency Contact: (Required) _____ **Phone:** () _____

How would you like to receive Newsletters? **By snail mail** **Link by E-mail to the Website**
If Snail mail and a part of a couple, do you wish for one newsletter only? **yes** **no**

MEMBERSHIP OBLIGATION AND WAIVER OF LIABILITY

I hereby certify that I am nineteen years of age or older and I agree to abide by the rules and regulations of the Victoria Alpine Ski Club and to participate in the events and activities sponsored by the Victoria Alpine Ski Club in accordance with the Club's rules, regulations and bylaws.

In consideration of the Victoria Alpine Ski Club acceptance of me as a registered member of the Club, and my being permitted to take part in the Club's events and activities, I hereby, for myself, my heirs, executors, administrators and assigns, hereby forever release, discharge and hold harmless the Victoria Alpine Ski Club, its directors, officers, representatives and agents (all of whom are hereinafter collectively referred to as "The Releasees") for any injury, loss or damage to my person or property howsoever caused, arising out of or in connection with my taking part in the said events and activities and notwithstanding that the same may be contributed to or occasioned by the negligence of the Releasees. This Agreement shall be effective and binding upon my heirs, next of kin, executors, administrators, assigns, and representatives, in the event of my death or incapacity. By signing this agreement, I certify that I have read and understand this agreement and that I am waiving certain legal rights, including the right to sue.

Signature: _____ **Witness:** _____

Printed Name: _____ **Printed Name:** _____

Signed this ___ **day of** _____ **Receipt Number:** _____