

**Roanoke Ski Club
Membership Application**

**Roanoke Ski Club
P.O. Box 371
Roanoke, VA 24003**

Please Print Neatly or Type

Name: _____ **Home Phone** (____) _____ - _____

Address: _____ **Work Phone** (____) _____ - _____

City: _____ **State:** ____ **Zip:** _____ **Cell Phone** (____) _____ - _____

Member Email Address:

How did you learn about us?

(please specify member's name, publication, retail establishment, web search, etc.)

FAMILY MEMBERSHIP:

Spouse's Name: _____ Work Phone: (____) _____ - _____

Spouse's Email Address: _____ Cell Phone (____) _____ - _____

Eligible Children's Names & Ages: _____

NEWSLETTER: Read online for free or receive a PAPER newsletter for \$20 / year (fee for print + postage)

MEMBERSHIP DUES: _____ Individual (\$30/yr) _____ Single Parent (\$35/yr)
(check one) _____ Family (\$40/yr) _____ Full-time Student under 23 (\$15/yr)

Membership Year: July 1 through June 30. Applications received on or after April 1 will extend through June 30 of the following year. If under age 18, parent or legal guardian must co-sign this application. "Family" includes children under age 18 or under age 23 if full-time student.

\$ _____ MEMBERSHIP DUES

\$ _____ Paper Newsletter (\$20) (optional)

\$ _____ **Total Enclosed** Check number: _____

Make check payable to the
Roanoke Ski Club, and mail
it with this signed and dated
application to:
Membership Director
PO Box 371
Roanoke, VA 24003

IMPORTANT: This application must be renewed each year.

Please read the following agreement and then sign and date:

I acknowledge that hazards are inherent in **ALL** activities, including without limitation skiing, snowboarding, whitewater rafting, canoeing, biking, hiking, and other activities. I acknowledge that I am in good health and able to participate without health problems in strenuous activities at high altitude and have read or will read the Mobility and Fitness to Travel Statement and the Roanoke Ski Club's ("RSC") Trip Procedures before signing up for any RSC trips. Therefore, in consideration of the benefits derived from my membership in the RSC, I waive any claim for, and assume all risk of, damage, injury, or loss to person or property, arising from or relating to participation in the activities of the RSC. I furthermore release and discharge the RSC and its officers, directors, members and agents from any claim, damage or cost which I may ever have arising from or relating to participation in the RSC. This agreement shall not be subject to any claim of mistake of fact, and regardless of the adequacy of the consideration provided, this agreement is intended to avoid future litigation and to be final and complete.

Witness the following signature(s) dated the _____ day of _____, 20____.

(Applicant's Signature)

(Co-Applicant's Signature, if Family membership)