

# **YOUNGSTOWN SKI CLUB**

## **ADULT MEMBERSHIP APPLICATION FORM**

Please neatly fill out the application and send a check or money order to:

**YOUNGSTOWN SKI CLUB  
P.O. BOX 841  
YOUNGSTOWN, OHIO 44501**

<input type="checkbox"/> <b>NEW MEMBERSHIP \$20.00</b>		
<input type="checkbox"/> <b>EARLY RENEWAL \$20.00</b>	<input type="checkbox"/> <b>LATE RENEWAL \$25.00</b>	

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

(Please be accurate and legible. This is important for you to receive all Club Information)

**\*\*PLEASE CHECK ALL THAT APPLY\*\***

<input type="checkbox"/> <b>Skier</b>	<input type="checkbox"/> <b>Snowboarder</b>	<input type="checkbox"/> <b>Social Member</b>
---------------------------------------	---	---

<input type="checkbox"/> <b>Beginner</b>	<input type="checkbox"/> <b>Require Lessons</b>
--	---

<input type="checkbox"/> <b>Intermediate</b>	<input type="checkbox"/> <b>Advanced</b>	<input type="checkbox"/> <b>Racer</b>
--	--	---------------------------------------

<b><u>RELEASE:</u></b>
<p>I acknowledge that I am at least eighteen (18) years of age and that membership grants me full access to all club functions with complete capacity to vote. I understand that I can serve on committees but not hold an office until twenty one (21) years of age. I acknowledge that many of the activities and events organized and sponsored by the Youngstown Ski Club, Inc., in particular, participation-type athletic activities, are dangerous, hazardous, and may cause damage, injury and/or death. In consideration of becoming a member, I assume any and all the risks of participation in such activities, including the liability thereof, and I release the Youngstown Ski Club Inc., its members, and officers, from responsibility thereof. This release shall remain in effect while I am a member, and/or when I participate in any such activity, even if the Youngstown Ski Club is negligent.</p>

Signed: \_\_\_\_\_ Date: \_\_\_\_\_