

DOUBLE DIAMOND POLISH SKI CLUB

Membership Application and Waiver

\$50.00 per adult

July 1, 200__ to June 30, 200__

NAME _____ DATE OF BIRTH ____ - ____ - ____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

HOME PHONE _____ WORK PHONE _____

(Note: Your address and phone numbers will be used only for the club records and correspondence.)

CHILDREN UNDER AGE 21 (natural, adopted or assigned guardianship)

1. _____ Date of birth ____ - ____ - ____
2. _____ Date of birth ____ - ____ - ____
3. _____ Date of birth ____ - ____ - ____

I apply for membership in the Double Diamond Polish Ski Club and pledge that, if accepted, I will abide by the ski Club policies to conduct myself in a socially accepted manner and to assist the officers and members to the best of my ability.

Also, I hereby agree to release and waive any rights, damages or recovery or my loss, including but not limited to, any bodily injury, death, loss of income or disability which may arise out of any activity, accident or loss of equipment which I may sustain as a result of any club activity.

DATE _____
Applicant's Signature (required yearly for each member)

DATE _____
Membership Director's Signature

Referred by (Name of Ski Member) _____

Double Diamond Polish Ski Club Survey

I heard about the Double Diamond Polish Ski Club from _____

I joined the Double Diamond Polish Ski Club because _____

My favorite skiing/board area is _____

Someday I'd like to ski/board _____

You can identify me on the slopes by my _____

Thank you for taking the time to fill out our membership survey. ☺