



**DON DIEGO SKI CLUB MEMBERSHIP APPLICATION**  
 Membership dates are 1 June through 31 May

- Single \$30.00**
  - Dual/Family \$45.00**
  - Newsletter by Mail \$10.00**
- Make checks payable to:  
**"Don Diego Ski Club"**

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Names: \_\_\_\_\_ Birthdays: \_\_\_\_\_

RENEWAL  NEW MEMBER

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

CASH: \$ \_\_\_\_\_ CHECK: \$ \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip(nine digit) \_\_\_\_\_

Newsletter by email: Yes  No

Phone(home): (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ E-Mail: \_\_\_\_\_

Occupation: \_\_\_\_\_ Referred by: \_\_\_\_\_

Other interests: Racing  Nordic  Biking  Backpacking  Camping  Golf  Tennis  Dancing  Skating   
 Volleyball  Wind Surfing  Kayaking  Trips(non-ski)  Other \_\_\_\_\_

**WAIVER AND RELEASE OF LIABILITY: (READ BEFORE SIGNING)**

In consideration of being allowed to participate in any way in the Don Diego Ski Club programs, related events and activities, I

\_\_\_\_\_, the Undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the many of the activities is significant, including the potential for permanent paralysis and death, and while particular skills, rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,

2. **I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES** or others and assume full responsibility for my participation; and,

3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,

4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, **HEREBY RELEASE AND HOLD HARMLESS** Don Diego Ski Club, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("**RELEASEES**"), **WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, OR LOSS OR DAMAGE TO PERSON OR PROPERTY, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE**, to the fullest extent permitted by law.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

X \_\_\_\_\_ Age: \_\_\_\_\_ DATE SIGNED: \_\_\_\_\_  
 (Participant's Signature)

**FOR PARTICIPANTS OF MINORITY AGE: (UNDER AGE 18 AT THE TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the **RELEASEES** from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, **EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES**, to the fullest extent permitted by law.

I also consent to allow medical treatment in the event of an emergency.

X \_\_\_\_\_ Date Signed: \_\_\_\_\_  
 (Parent/Guardian signature)

Emergency Phone Number: \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

**ALL ADULT MEMBERS MUST SIGN THIS APPLICATION AND WAIVER FORM**  
 Mail membership application and fee to: Noni Henning, 1099 First Street, #411, Coronado, CA 92118