

# SNOWDRIFTERS MEMBERSHIP APPLICATION & RENEWAL FORM

**PURPOSE:** As defined by the Snowdrifter's Constitution, "To promote and encourage organized skiing in the Tri-City area and also provide opportunity for instruction. It shall also be the purpose of this organization to assist in charitable work and provide social functions for its members.

## SNOWDRIFTERS & YOU

AGE REQUIREMENT      21 YEARS or OLDER      Please check one:  21-32    33-45    46 over  
 ACTIVITIES .....      Statewide, European and Canadian Ski Trips (downhill & Cross Country).  
 INSTRUCTIONS .....      Provided through our affiliation with the NDSC (beginners to racing class)  
 RACING .....      Club racing, NASTAR, MDSC, and Adult Racing League.  
 DANCES .....      Fall, Halloween, Christmas, and Spring Dances.  
 OTHER ACTIVITIES .....      Canoeing, camping, hiking, cycling, rollerblading, golf, and after work parties.

**I AM INTERESTED IN:** ✓

- Downhill Racing
- Downhill Skiing
- Cross Country Skiing
- Parties, Trips, Outings

**I MAY BE INTERESTED IN:** ✓

- Committee Positions
- Board Positions
- Organizing an Event
- Helping whenever needed

**For additional information call:** Sue Osborne 684-9308 or any other Board Member.

## MEMBERSHIP DUES

Mail check and signed form to:

**Snowdrifters Ski Club**      For one full year (Sept 16 to Sept 15)      For 1 PERSON ..... \$ 25.00  
 Membership Committee      For 2 people residing at the same address      For A COUPLE ..... \$30.00  
 P.O. Box 6445      For partial year (after April 1)      For 1 PERSON ..... \$12.50  
 Saginaw, MI 48608-6445      For A COUPLE ..... \$15.00

Make checks payable to:  
**Snowdrifters Ski Club.**

**Check Number:** \_\_\_\_\_

**Check Amount:** \_\_\_\_\_

**Check Date:** \_\_\_\_\_

## Assumption of risk or personal loss, injury or release of liability

NAME (s): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBERS: \_\_\_\_\_

- Yes, I would like the above number(s) published in the Snowdrifters Ski Club Membership booklet.
- New Member – If so, referred by whom? \_\_\_\_\_ Reinstatement
- E-mail address \_\_\_\_\_

### **SIGNATURE IS A REQUIREMENT OF MEMBERSHIP**

In consideration for membership in the Snowdrifters Ski Club and participation in any sponsored function, the undersigned applicant agrees to the following conditions: fully understand the Club sponsored functions my involve risk of personal loss and injury, the undersigned agrees to assume full responsibility for any loss or injury to himself or herself, which may result from participation or attendance at such functions. Further, the undersigned agrees to hold Snowdrifters Ski Club, its officers and all other members of the club, free from any liability for said injuries. This agreement is Applica able to the Snowdrifters, its officers and its members only and does not affect any course of action which may arise against other parties as a result of personal loss and injury sustained during attendance at or participation in Club sponsored functions.

Signature – Date

Signature- Date

Check if this is a renewal

**PLEASE PRINT AND FILL OUT COMPLETELY SO WE HAVE YOUR CORRECT INFORMATION**