



# MEMBERSHIP RENEWAL AND APPLICATION FORM

**\*Family members may use same form - both to sign waiver overleaf**

Name \_\_\_\_\_

Family Mbr: \_\_\_\_\_

Birthdate: \_\_\_\_\_  
Year      Month      Day

\_\_\_\_\_   
Year                  Month                  Day

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

\_\_\_\_\_

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

\_\_\_\_\_

E-Mail \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailing & Street Address: \_\_\_\_\_

## EMERGENCY CONTACT OR NEXT OF KIN:

Name	Contact Telephone Nos.

Emergency Contact E-Mail: \_\_\_\_\_

**New** Voting Member @ \$20.00 \$\_\_\_\_\_ cash  or cheque

Membership **Renewal** @ \$20.00 \$\_\_\_\_\_ cash  or cheque

If mailing, please sign waiver and enclose membership form & fee payable to:

**Pemberton Valley Seniors Society,**  
c/o #24-1446 Vine Road, Pemberton, V0N 2L1

**Optional:** I would like to make a donation of \$ \_\_\_\_\_ to the Pemberton Valley Seniors Society

Note: Tax receipts issued for charitable donations of \$25 and above.

Please add my name to your mailing list Yes  No

**Please turn over to review and sign the Waiver Form on p.2**

# PEMBERTON VALLEY SENIORS SOCIETY WAIVER

## ASSUMPTION OF RISKS, WAIVER OF CLAIMS, RELEASE OF LIABILITY AND INDEMNITY AGREEMENT

I CONFIRM that I have asked the Pemberton Valley Seniors Society (the "Society") to permit me to participate in the Society's activities (the "Activities"). I am aware of the risks and dangers inherent with my participation in the Activities. I freely accept and fully assume all such risks and dangers and the possibility of personal injury, death, property damage and loss resulting there from. I nevertheless wish to participate in the Activities.

### WAIVER OF CLAIMS, RELEASE OF LIABILITY AND INDEMNITY AGREEMENT

In consideration of the Society accepting my request, I hereby agree to waive any and all claims that I may in the future have against the Society and its directors, officers, employees, volunteers, sponsors, agents, representatives, successors and assigns (the "Releasees") and to release the Releasees from any and all liability for any loss, damage, expense or injury including death that I may suffer, or that my next of kin may suffer, as a result of my participation in the Activities due to any cause whatsoever, including negligence, breach of contract or breach of any statutory or other duty of care on the part of the Releasees, and including the failure on the part of the Releasees to safeguard or protect me from the risks and dangers referred to above. I further agree to hold harmless and indemnify the Releasees from any and all liability for any damage to property or or personal injury to any third party, resulting from my participation in the Activities. This Agreement shall be binding upon me and my heirs, next of kin, executors, administrators, successors, assigns and representatives; it shall be governed by and interpreted in accordance with the laws of the Province of British Columbia.

I have read and understand this agreement and I am aware that by signing this agreement I am waiving certain legal rights which I or my heirs, next of kin, executors, administrators, successors, assigns and representatives may have against the Releasees.

**Signed this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witnessed by

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witnessed by