



Membership Application

Approved by the Exec. Committee
May 2020



Types of Memberships:

Single \$35.00
(18 and Over)

Family \$45.00
(Married Couples 18+ w/wo children or Single Parents)

Wild Card \$45.00
(18+ with one guest)

Last Name	First Name	Date of Birth	Membership New or Renewal	Sex
_____	_____	_____	_____	M/F
_____	_____	_____	_____	M/F
_____	_____	_____	_____	M/F
_____	_____	_____	_____	M/F
_____	_____	_____	_____	M/F

Address: _____

City: _____ State: _____ Zip: _____

Phone: (C) _____ (W) _____ (H) _____

Email: _____

Have you ever been a member of the OKC Ski Club? Yes No If yes, when? _____

If this is a new membership, did anyone refer you? Yes No If yes, who? _____

By my signature hereto, I hereby release, hold harmless and indemnify the Oklahoma City Ski Club, Inc. (hereafter "Ski Club") and the Ski Club's employees, agents and officers, for bodily injury, property damage, loss of personal property, delays or inconvenience, or any other damages, sustained by me, or a family member or guest of mine, while participating in any activity or an any trip arranged or organized, in whole or in part by the Ski Club, even if caused by the negligence of the Ski Club, or caused by the negligence of any Ski Club, employee agent, officer or member. I acknowledge that skiing, snow boarding and other activities associated with the Ski Club are inherently hazardous activities and accidents or injuries are to be expected, and I hereby assume this risk on behalf of myself, my family members and my guests. The assumption of risk is a consideration for the condition of acceptance of my request for membership in the Ski Club. It is understood that membership dues and contributions to the Oklahoma City Ski Club, Inc. are not tax deductible as charitable contributions for income tax purposes.

Signature: _____ Date: _____

(Application will not be accepted without signature)

Questions: Info@okcskiclub.org

Mail: PO Box 54912, Oklahoma City, OK 73154-1912

Checks Payable to Oklahoma City Ski Club

Office Use Only: Amount Paid _____	Date _____	Member # _____
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