



NORTH ISLAND Snowdrifters OF SAN DIEGO, CA

Membership Form

Name (Primary)	Sex	Birthday	Season Pass	Age Group	Referred By
Address		City	State	Zip Code	
Home Phone	Cell Phone	E-mail Address		Place * next to information not to publish.	

Name (Family Member)	Sex	Birthday	Season Pass	Age Group	Member Dues: Please check one Single - \$40 <input type="checkbox"/> Web Newsletter Family - \$60 <input type="checkbox"/> Web Newsletter Newsletter available at: www.nisnowdrifter.com
Home Phone	Cell Phone	E-mail Address			
Name (Family Member)	Sex	Birthday	Season Pass	Age Group	
Home Phone	Cell Phone	E-mail Address			

Age Group: 1 = <20; 2 = 21->30; 3= 31->40; 4=41->50; 5=51->60; 6 =>61

Note!!!

Select items of interest that you or your family members would be inclined to participate in. Enter ✓ in activity box.

Volunteer	Leisure	Active Sports	Ball Sports	Water Sports
Board <input type="checkbox"/>	Theater <input type="checkbox"/>	Down Hill <input type="checkbox"/>	Golf <input type="checkbox"/>	Water Ski <input type="checkbox"/>
Trip Leader <input type="checkbox"/>	Travel <input type="checkbox"/>	Cross Country Ski <input type="checkbox"/>	Tennis <input type="checkbox"/>	Rafting <input type="checkbox"/>
Condo Captain <input type="checkbox"/>	Dining <input type="checkbox"/>	Snow Board <input type="checkbox"/>	Softball <input type="checkbox"/>	Kayaking <input type="checkbox"/>
Committee <input type="checkbox"/>	Cooking <input type="checkbox"/>	Cycling <input type="checkbox"/>	Volleyball <input type="checkbox"/>	Fishing <input type="checkbox"/>
Gen. Helper <input type="checkbox"/>	Table Games <input type="checkbox"/>	Hiking <input type="checkbox"/>	OTL <input type="checkbox"/>	Snorkel <input type="checkbox"/>
	Wine Tasting <input type="checkbox"/>	Camping <input type="checkbox"/>	Racquetball <input type="checkbox"/>	Scuba <input type="checkbox"/>
	Spa Outings <input type="checkbox"/>	Back Pack <input type="checkbox"/>	Bowling <input type="checkbox"/>	Surfing <input type="checkbox"/>
	Movies <input type="checkbox"/>	Dancing <input type="checkbox"/>	Pool <input type="checkbox"/>	Boating <input type="checkbox"/>

WAIVER AND RELEASE OF LIABILITY, READ BEFORE SIGNING: In consideration of being allowed to participate in any way in the North Island Snowdrifters 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** the North Island Snowdrifters, 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 _____ Date: _____ X _____ Date: _____

Participant Signature

Participant 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 Releases, 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 _____ Emergency Phone No. _____ Emergency Contact: _____

(Parent/Guardian)

Make checks payable to **North Island Snowdrifters** and send to: **Alan Godwin; 4678 Muir Ave; San Diego, CA 92107**