Membership Application

8	Sublette County Ski & Snowboard Association		
	P.O. Box 2033	\$35.00	
	Pinedale, WY 82941 sublettecountysnowsports.org	Check	
	scssaclub@gmail.com	Cash	
		Credit Card	
Date	Please ma	ke checks payab	ole to SCSSA
Member Name			
Email	Cell Pho	one	
Mailing Address			
Ple	ease consider volunteering		
THIS SEASON	NEXT SEA	SON	
□ Volunteer coaching	□ Membership Card		
 Sunny Korfanta GS Flamingo Cup 	□ 2020 Ski Swap □ 2020 Warren Miller I	Film	
- I miningo oup			

□Would you like to be invited to club meetings?

WAIVER RELEASE

I, or my child, have (has) enrolled as a participant or member in the Sublette County Ski and Snowboard Association (SCSSA) programs and/or events voluntarily, and acknowledges and understand that the activities, programs and trips associated with the Sublette County Ski and Snowboard Association, such as skiing (Alpine or Nordic), snow shoeing, snowboarding, racing, training, travel, outing or activity and the like, hereinafter referred to as the "Events," contain certain inherent foreseeable and unforeseeable risks of injury to me, or my child's, person and/or property, such as, but not limited to, loss of control or falling, contact with unexpected or expected snow conditions or objects, both natural and manmade, and all other events or incidents related to the sport or skiing, which may result in loss of enjoyment of life, emotional distress, pain and suffering, disfigurement, physical or mental disability, loss of earnings or income, loss of consortium, loss of profits, loss of life, and all other claims and causes of action which could result from my child's, participation in the events, hereinafter collectively referred to as the "Inherent Risks." I also assume all risk in relation to such activity while participating on any outing or activity with the Sublette County Ski and Snowboard Association. I understand, and I am aware, that the Sublette County Ski and Snowboard Association trips are not led by professional guides. At the sole discretion of the trip or activity leader or coordinator, if my behavior is deemed to be dangerous to myself or others, I may be asked to leave the trip or activity, and I understand, and agree, that any cost incurred will be my sole responsibility and at my sole expense. I also acknowledge that the Sublette County Ski and Snowboard Association is a non-profit organization, and that all officers, directors, trustees, and volunteers are immune from civil liability for any act or omission resulting in damage or injury to any person, including myself, or my child.

Nevertheless, I, or my child, desire(s) to participate in the Sublette County Ski and Snowboard Association Events, and hereby assume the Inherent Risks of participating in the Events, and wave and release any and all claims that I, or my child, or the estate, family, heirs, and assigns, of myself, or my child may have, or could potentially arise, against the Sublette County Ski and Snowboard Association. Its officers, directors, trustees, coaches, and volunteers, as well as all claims brought against the Sublette County Ski and Snowboard Association, its officers, directors, trustees, and volunteers, as well as all owners and lessees of property where the programs and/or events are held, as a result of my, or my child's, own actions or missions. Date

Member Signature

Parent Signature ____

Required

Date

If applicant is under 18 years old