



Membership Application

(Skip the paper and do it online at <http://www.skimich.com/join-renew>)

Name: _____ Birth Month & Day: _____

Email: _____

Address: _____
Street City State Zipcode

Phone: _____

Emergency Contact: _____ **Phone:** _____

Membership Roster

Can we publish your: (please circle)

Name	Yes	No
Email	Yes	No
Address	Yes	No
Phone Number	Yes	No

In an effort to be environmentally friendly the roster will be made available online. We will still make printed rosters available upon request.

_____ Check here if you would like a printed roster.

Schuss News will be delivered electronically.
Please ensure we have your correct email

How did you hear about us?

Facebook?

Website?

A club member?

Other?

Membership Type

Which Type of Member are you?

Returning	\$35.00
New	\$40.00

Are you going on a Western Trip?

Yes No

If so, which one:

Send Payments to:

Schussmeisters' Ski Club
544 Boutell Dr
Grand Blanc, MI 48439

Or register online at <http://www.skimich.com>

In applying for membership, it is my understanding that this application is for the current season. In the event, I become a member, I agree not to hold the Club liable for injury, loss, or damage resulting from Club functions or the use of Club property or equipment. I have passed my 18th birthday and I understand that the legal drinking age is 21. I will not partake in any illegal activity while participating in the club activities. I will abide by the by-laws of the Club and submit to their authority regarding my membership in this Club. I authorize the Club to use my photo and/or information, including my child(ren), and guests related to my experiences with the Club. I understand this information may be used in publications including electronic publications, promotional literature, advertising, website(s), and/or social media platforms. My consent is freely given as a public service to the Club, without expecting payment. I release the Club and their respective officers, and agents from any liability which may arise from the use of such news media stories, promotional materials, written articles, video(s), and/or photographs. By signing this application, I am acknowledging my agreement and that I have read these conditions.

Signature of Applicant: _____ Date: _____

Office Use: Paid Date:

Check#:

Cash:

Trip: Y/N