



Wasi Cross Country Ski Club
 PO Box 46
 Astorville ON P0H 1B0
 www.wasiski.com

Membership Registration 2018-2019

New Membership Renewal

MEMBERSHIP INFORMATION - Adult #1			
Adult #1 Name:		Age: (as of Dec 31)	Signature:
Address:		City:	Postal Code:
Home Phone:	Cell Phone:	Email:	
I can volunteer for:	Snowshoe Trail Maintenance <input type="checkbox"/>	Winter Trail Grooming <input type="checkbox"/>	Chalet Host <input type="checkbox"/>
	Off Season Trail Maintenance <input type="checkbox"/>	Special Events <input type="checkbox"/>	

MEMBERSHIP INFORMATION - Adult #2 (required for Couple, Senior Couple, and Family A plans)			
Adult #2 Name:		Age: (as of Dec 31)	Signature:
Home Phone:	Cell Phone:	Email:	
I can volunteer for:	Snowshoe Trail Volunteers <input type="checkbox"/>	Winter Trail Grooming <input type="checkbox"/>	Chalet Host <input type="checkbox"/>
	Off Season Trail Maintenance <input type="checkbox"/>	Special Events <input type="checkbox"/>	

List all children who will be skiing and their ages.				
Name	Age:	Name:	Age:	
1		3		
2		4		

I/we, the above signed, understand that there are inherent risks associated with cross country skiing. I agree to ski at a level appropriate to my skills to ensure my safety and the safety of others. I accept full responsibility for my safety and release the Wasi Cross Country Ski Club, its members, agents, or any person connected with the club from all liability for any injuries or damages whatsoever arising from my participation at the club.

WASI SKI CLUB 2018-2019 FEE SCHEDULE	
Single	<input type="radio"/> \$67
Senior (60+)	<input type="radio"/> \$56
Couple	<input type="radio"/> \$112
Senior Couple (1 is 60+)	<input type="radio"/> \$94
Family A (2 adults and 1 or more children - see reverse for definitions)	<input type="radio"/> \$131
Family B (1 adult and 1 or more children - see reverse for definitions)	<input type="radio"/> \$77
Club Insurance Fee: Add \$9 per member listed above to cover mandatory Club Insurance. # of members X \$9= \$_____	+ \$ _____ - \$ _____
Early Bird Special: Subtract \$10 if paying before Dec 15 2018	
TOTAL FEES DUE	= \$ _____

Please send this completed form and a cheque payable to the **Wasi Cross Country Ski Club** at the address at the top of this form. Membership tags will be mailed to you on receipt of your completed form and payment.

Questions? Contact the membership coordinator: Donna Burton, at membership@wasiski.com, 705-471-8406, or via post at the above address.

How to Complete This Form

Step 1 – Fill in the name of your main family contact person (Adult #1) along with mailing address, phone and optional email address. If you are registering for the Couple, Senior Couple, or Family A plans, fill in the details for Adult #2.

Step 2 – For Family A and Family B plans, list all children along with their ages as of December 31, 2018 in the spaces provided.

Adult members who are 18 years of age or more must provide a signature in the spaces provided to indicate that they have read and accepted the waiver printed below this section.

Step 3 – Calculate your membership fees.

- a) Choose the basic fee that applies to you from the six categories available
- a) Add \$9 per member listed in step 2 for Club Insurance
- b) If you are paying on or before December 15 2018 subtract \$10 from your total

Step 4 – Mail the form with a cheque payable to the Wasi Cross Country Ski Club at the address at the top of this form.

Step 5 – If you have the time to volunteer to help out with club activities, check off those areas that might be of interest and we will contact you.

Definitions (based on member age as of December 31, 2018)

“Adult” – between 18 and 59 inclusive

“Senior” – 60 or over

“Children” – 17 or younger OR full-time dependant student

“Couple” – two adults

“Senior couple” – one adult and one senior, or two seniors

“Family A” – two adults and one or more children living at the same address

“Family B” – one adult (who will be skiing) and one or more children living at the same address

Club Insurance Fee

We are required to carry insurance at our club. This policy protects our club’s assets, board, and membership from lawsuits. The cost of this policy is \$9 per member for the coming season. This applies to all members of your family that you list.

TIP: If you are applying for a family membership, only list and count those family members that will

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PRIVACY

The information on this form will be held in the strictest confidence and will be used by select members of the executive for the purposes of operating the Wasi Cross Country Ski Club. The information provided on this form will never be shared with any other individual or organization

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