



# Hole in the Wall Paddling Club Membership Application

\_\_\_\_\_  
Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State & Zip Code

(\_\_\_\_) \_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

Please describe your paddling skill level:

Are you interested in skill building classes? \_\_\_Yes \_\_\_No If yes, what type?

What type of paddling activities do you enjoy?

Are you interested in volunteer opportunities? \_\_\_Yes \_\_\_No

\_\_\_New Member(s) If new, please add a brief introduction for our next newsletter on the back of this form.

### **INFORMED CONSENT TO ACCEPT MEMBERSHIP**

I recognize that kayaking may involve certain risks of possible danger to me. I further recognize that the Hole in the Wall Paddling Club carries on its activities for the benefit and recreation of its members and guests. I agree to assume and be responsible for all the risks that may be involved in, or occur during, any phase of each and every activity of the Hole in the Wall Paddling Club in which I choose to participate. I hereby agree to release and hold harmless the Hole in the Wall Paddling Club, its officers, directors, activity leaders, and all its members from any and all claims, demands, actions, causes of action, costs, losses of services, and expenses arising from or accruing to me as a result of injury or death or damage to my property while I am engaged in any phase of kayaking activity. I further agree that I am fully competent to enter into this agreement, and that I have read and fully understand the content and effect of this document. I make this release and agreement on behalf of, and it shall be binding upon me, my heirs, assigns, personal representative and dependents.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

### **PARENTS OR GUARDIAN'S ADDITIONAL INDEMNIFICATION (Must be completed for participants under the age of 18)**

In consideration of (print minor's name) \_\_\_\_\_, a Minor being permitted by The Hole In The Wall Paddling Club to participate in it's activities, I further agree to indemnify and hold harmless The Hole in the Wall Paddling Club from any and all Claims which are brought by, or on behalf of the Minor, and which are in any way connected with such participation by the Minor.

Parent/Guardian \_\_\_\_\_

Printed Name \_\_\_\_\_ Date: \_\_\_\_\_

Enclose \$20 for individual (\$10 after Jul 1st) **or** \$40 for Family (\$20 after Jul 1st) by check or money order payable to: **"Hole in the Wall Paddling Club."** Each joining member shall sign a separate copy of the Informed Consent form and mail with the check to the Club Treasurer:

**Sarah Roberts  
1303 26<sup>th</sup> St.  
Anacortes, WA 98221**