



Membership Form 2011-2012

Membership is open to anyone 21 years old or older.

Please complete the **ENTIRE** form and sign.



Name: (1) _____ Birth Month: _____ and Day: _____

Name: (2) _____ Birth Month : _____ and Day: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone Number: _____ Cell Phone (optional): _____

E-mail address: (1) _____ (2) _____

In the event of an emergency, please contact: _____ Phone: _____

Circle One

How would you like to receive the "Foxytales" newsletter?	E-mail	OR	Mail
Would you like to be considered for a Trip Leader Position?	Yes		No
Would you like to be considered for a Board Member Position?	Yes		No
May we add your contact info to our roster? (Available to Members Only)	Yes		No

Please recommend one ski destination you'd like to see the club take a trip to: _____

Membership Dues

Membership Type	If Paid by 10/31/11	If Paid After 10/31/11
Single	\$25	\$35
Married (as defined by the IRS)	\$40	\$50

Please mail your check for dues made out to:

Sly Fox Ski Club
PO Box 1613
Appleton, WI 54912-1613

PLEASE READ BEFORE SIGNING

I certify that I am at least 21 years of age and do hereby accept the policies and practices of the Sly Fox Ski Club. I understand that in my participation in club-sponsored events carries a degree of risk of injury or death. I hereby unconditionally waive and release the Sly Fox Ski Club, its officers, directors, agents, and members from any and all liabilities arising from any injury, property damage or loss I may suffer as a result of my actions. Further, I hereby grant full permission to any and all foregoing to use any photograph, videotape, motion pictures, recordings, or other record of any ski club event for any legitimate purpose. Please see the current Sly Fox Club policies or view them at the website listed below.

Signature: _____ Date: _____

Signature: _____ Date: _____

For current trip policies and other details, please see the website: www.slyfoxskiclub.org