

## Sly Fox Ski & Snowboard Club

## **Annual Membership Application/Renewal & Waiver Form**

Membership year is May 1, 2025 to April 30, 2026

MICEOE				
Dues \$25 Per Person  Each member <u>must</u> complete an Application/Renewal/Waiver form		Returning Member	New Member	
Name:	1	Birthdate: MM/DD/YYYY		
Address:		/ Cell Phone / Email changed since last year YES		
Home Phone:	Cell Pi	none:		
Email:				
I am a new member and referred by club member:				
What ski destinations are you interested in visiting?				
We are always looking for individuals to assist on our committees.  Can you help us out? Events, WEB, Social Media, Board Member, Marketing, Trip Leader/Assistant Trip Leader		r/Assistant Trip Leader	YES NO	
hereby accept the policies and practices of the Sly Fox Ski Club. I understand that in my participation in clubsponsored events carries a degree of risk for health concerns, 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 health concerns, 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	fund for cancelations by the participant must submitted in writing to the Sly Fox Ski Club and of Directors, P. O. Box 1613, Appleton WI. 212-1613. The written request must indicate ach specific future Sly Fox event any refunds to credited towards, or for the Sly Fox Treasurer assue a refund check. Refunds will only be used after all of the bills related to the trip have an paid. All decisions on refund amount will be de by the Board of Directors and are final  signing and submitting this form, I agree that I are read and accept the trip policies as set for I by the Sly Fox Ski & Club			
Signature:		Date .		
Mail your completed form with payment to: Sly Fox Ski Club PO Box 1613 Appleton, WI. 54912-1613				

Payment Details:

Administrative Use Date: \_\_\_\_\_