



Sly Fox Ski & Snowboard Club

Annual Membership Application/Renewal & Waiver
 Membership year is May 1, 2026 to April 30, 2027

PLEASE PRINT INFORMATION BELOW

Dues \$25 Per Person <i>Each member <u>must</u> complete an Application/Renewal/Waiver form</i>		<input type="checkbox"/> Returning Member <input type="checkbox"/> New Member
Name:	Birthdate: <small>MM/DD/YYYY</small>	
Address:	Address / Cell Phone / Email <i>has not changed since last year</i> NO YES	
Home Phone:	Cell Phone:	
Email:		
<i>I am a new member and referred by club member:</i>		
What ski destinations are you interested in visiting?		
We are always looking for individuals to assist on our committees. Can you help us out? <i>Events, WEB, Social Media, Board Member, Marketing, Trip Leader/Assistant Trip Leader</i>		YES NO

READ WAIVER 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 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.

Refund for cancelations by the participant must be submitted in writing to the Sly Fox Ski Club Board of Directors, P. O. Box 1613, Appleton WI. 54912-1613. The written request must indicate which specific future Sly Fox event any refunds to be credited towards, or for the Sly Fox Treasurer to issue a refund check. Refunds will only be issued after all of the bills related to the trip have been paid. All decisions on refund amount will be made by the Board of Directors and are final. .

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 events for any legitimate purpose.

By signing and submitting this form, I agree that I have read and accept the trip policies as set for and by the Sly Fox Ski & Snowboard Club.

All Sly Fox Ski Club policies and other trip information is posted on the website www.slyfoxskiclub.org

Signature: _____ **Date** _____

Mail your completed form with payment to:
Sly Fox Ski Club PO Box 1613 Appleton, WI. 54912-1613

Administrative Use

Date: _____

Payment Details: _____