

Skilaufers Annual Renewal & New Membership Form

Name _____ (print name as you want it to appear in Directory)
 Address _____ Unit/Apt _____
 City, State, Zip _____
 Winter Address: _____ from _____ to _____
 Home phone: _____ Work phone: _____ Cell phone: _____
 Email address: _____

Birthday (month and day only): _____ (so we can help you celebrate at **Happy Birthday TGIF!**)

Check if OK to include in the Member Directory: ___ Address ___ Phone #s ___ Email address

Membership Options: *Your non-refundable membership will expire one year after your membership form is received.*

___ \$15 if you are interested in viewing the newsletter from the website www.madisonskilaufers.org or as an email attachment instead of receiving a newsletter in the mail. Includes free admission to General Meetings.

___ \$20 if you are interested in receiving a newsletter in the mail. Includes free admission to General Meetings.

Amount enclosed (payable to Skilaufers, Inc): \$ _____ (cash _____ or check # _____)

All Skilaufers activities, unless specified, are designed and planned for participants 21 years of age or older.

Interest and Volunteer Signup

I would like to participate in, help with or lead the following activities and committees – please call me!

- | | | | |
|-----------------------|-----------------------------|-----------------------|--------------------|
| ___ Biking | ___ Dancing | ___ Newsletter | ___ Social Events |
| ___ Book club | ___ Dining Out | ___ Parties/picnics | ___ Tennis |
| ___ Camping | ___ Downhill Skiing | ___ Planning meetings | ___ TGIF greeter |
| ___ Canoe/kayaking | ___ Games | ___ Publicity | ___ Travel |
| ___ Cards | ___ Golf | ___ Rafting/boating | ___ Volleyball |
| ___ Community service | ___ Monthly meeting greeter | ___ Skilaufers Board | ___ Walking/Hiking |
| ___ X-country Skiing | ___ Movies | ___ Snowshoeing | ___ Website |

YOUR MEMBERSHIP CANNOT BE PROCESSED UNTIL YOU HAVE READ AND SIGNED THE FOLLOWING:

In case of emergency, notify: _____

Cell phone: _____ Home phone: _____

The undersigned must be at least 21 years of age.

The undersigned does hereby accept and voluntarily assume all risks of personal injury, death, and loss or damage to property which might be incurred by me during my participation in any Skilaufers-sponsored activity or in connection therewith. I assume all liability for injury to or damage incurred by others as a result of my conduct while at such activity. I understand that a certain level of mobility and ability may be necessary for participation in some activities, and I will make independent arrangements for any assistance I need.

The undersigned, on his or her own behalf and behalf of all heirs, administrators, successors and assigns, does hereby release Skilaufers, Inc. and officers, directors, employees, agents, insurers and customers of and from all claims, demands, actions, causes of action, debts and liabilities, whether known or unknown, in law or in equity, arising from participation of the undersigned in Skilaufers organized events.

Signature: _____ Date: _____

**Return signed, completed form and check payable to Skilaufers, Inc to:
 Skilaufers Membership, PO Box 8511 Madison WI 53708-8511**