NEWPORT SKI CLUB MEMBERSHIP APPLICATION



Newport Ski Club P.O. Box 4253 Middletown, RI 02842-0012 https://www.newportskiclub.org

Miduletown, RI 02842-0012			
Name:			Date of Birth (mm/dd/yyyy):
Address:	City:	State:	Zip Code:
Occupation:	Phone: (mobile 🗆/ landline 🗅)	Email:	
Children's Names and DOBs (mm/dd/yyyy):			
Emergency Contact: (Name and phone number including area code)			
How did you hear about the Newport Ski Club?			
NSC Member Reference:			
The NSC depends on the active participation of its members. Please list any special skills, talents, and interests that would be of service to our Club: (i.e., financial, administrative, organizational, leadership, trade, design, artistic, culinary)			
BY PAYMENT OF MY APPLICATION FEE TO THE NEWPORT SKI CLUB, I AGREE TO THE WAIVER, HOLD HARMLESS, RELEASE AND INDEMNITY AS FOLLOWS: IN CONSIDERATION OF MY APPLICATION FOR MEMBERSHIP IN THE NEWPORT SKI CLUB (NSC), I HEREBY RELEASE, INDEMNIFY AND AGREE TO HOLD THE NSC, ITS OFFICERS, EXECUTIVE COMMITTEE, VOLUNTEERS, AGENTS AND MEMBERS (COLLECTIVELY NSC), HARMLESS FROM, AND WAIVE ON BEHALF OF MYSELF, MY HEIRS, FAMILY MEMBERS (INCLUDING MINORS), AND GUESTS THAT I HOST AT THE LODGE OR AT ANY NSC EVENTS, ANY AND ALL CLAIMS, CAUSES OF ACTION, LIABILITY, DEMANDS, AND DAMAGES ARISING OUT OF MY PARTICIPATION IN NSC ACTIVITIES OR MY USE OF THE LODGE. I UNDERSTAND THAT THIS RELEASE DISCHARGES THE NSC FROM ANY LIABILITY OR CLAIM THAT I, MY FAMILY, HEIRS, REPRESENTATIVES OR GUESTS MAY HAVE AGAINST THE NSC. IN ANY ACTION BROUGHT BY MYSELF, HEIRS, FAMILY MEMBERS, HEIRS, REPRESENTATIVES, OR GUESTS AGAINST THE NSC, I AGREE TO INDEMNIFY THE NSC AGAINST ALL COSTS, INCLUDING BUT NOT LIMITED TO ATTORNEY FEES, AND AWARDS AND INTEREST THAT MAY BE ENTERED AGAINST THE NSC. Signature Date			
Signature	Date		

Please include your \$150 application fee by check payable to the Newport Ski Club. The application fee is nonrefundable and is renewable annually. There is a \$100 Initiation Fee due upon acceptance into membership.