



Fox Valley Snowdrifters Ski Club Application for Membership

For Club Use Only	
Card(s): _____	Discount Card _____
Executive Board Approval/President Signature	

Date Paid _____	Amount _____
Check No. _____	Cash _____
New Member _____	Renewal _____

If you ARE a current member AND you are renewing your membership AND we receive your payment before April 30, you are allowed a \$5 discount for a single membership renewal, OR you are allowed a \$10 discount for a family renewal.

Check boxes that apply:

- New Member Renewal
- Single member (includes any children under age 21) \$30 per year
- Family (includes husband & wife and any children under age 21) \$60 per year
- Past President Waived for 5 years

Your Name: _____ Spouse's Name: _____

Address: _____ Home Phone: _____

City/State/Zip: _____

E-mail: _____ With access to internet to download newsletter

Your Employer/Occupation _____ Work phone: _____

Spouse's Employer/Occupation _____ Work phone: _____

				Skiing Ability			
Name	Age	Birthday	Never-ever	Beginner	Intermediate	Advanced	
(self)							
Spouse							
Dependents							

As a consideration of being accepted as a member, I do hereby agree to release, hold harmless, and indemnify the Fox Valley Snowdrifters Ski Club, its officers and agents, from any and all claims on behalf of myself, my heirs, and assigns, which I or we may have against said club and do further agree to indemnify said club, its officers and agents, from any and all claims and expenses for which it may be liable or incur by reason of my association with said club.

Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

Make checks payable to: **Fox Valley Snowdrifters Ski Club**

Mail form and check to:
Membership Chairperson
Fox Valley Snowdrifters Ski Club
P.O. Box 697
Batavia, IL 60510