

# KITTYHAWK SKI CLUB, INC. MEMBERSHIP APPLICATION

(Membership Year runs from 1 July to 30 June)

Last Name \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ Spouse/Significant Other Name \_\_\_\_\_

My address has changed

My phone has changed

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone 1: \_\_\_\_\_ Cell Phone 2: \_\_\_\_\_

I can receive Text Messages: \_\_\_ YES \_\_\_ NO      I can receive Text Messages: \_\_\_ YES \_\_\_ NO

Email Address(s): \_\_\_\_\_

*Please print carefully!!*

<i>INDIVIDUAL INFORMATION</i>	<i>SPOUSE INFORMATION</i>	<i>Type Membership</i>
Nickname: _____	Nickname: _____	
Birthday:      Month      Day	Birthday:      Month      Day	Individual (\$30)
Preferred Phone: _____	Preferred Phone: _____	Family (\$45) Up to 2 adults and children under 22 living in the same household.
Level Skier: _____	Level Skier: _____	Referred by: _____
Hobbies: _____	Hobbies: _____	

I will pay by: \_\_\_\_\_ Check \_\_\_\_\_ Electronically

Children's Names and Ages: \_\_\_\_\_

I am interested in working with the following club committees:

Ski Trips \_\_\_\_\_ Social \_\_\_\_\_ Membership \_\_\_\_\_ Programs \_\_\_\_\_

Biking \_\_\_\_\_ Golf \_\_\_\_\_ Publicity \_\_\_\_\_ Other (write-in) \_\_\_\_\_

I hereby declare that I am at least 21 years of age or active duty military and agree to subscribe and support the constitution and bylaws of Kittyhawk Ski club and will abide by the rules and regulations of the club.

I hereby assume all the risks and accept all responsibility for any injuries or damage which may result in my or my family's participation in Kittyhawk Ski Club, Inc, the Ohio Valley Ski Council, and/or affiliated ski club activities and further release said organization from any and all responsibility for any and all claims of damage or otherwise that may be brought about by myself or my heirs.

I authorize release of my contact information (Name, address, e-mail, phone numbers) to other members of Kittyhawk Ski Club. I agree to use other's contact information only for ski club related activities.

Write YES Or NO in the box to the right.  
If box is left blank, assumption is release is authorized.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Make checks out to **Kittyhawk Ski Club** and mail to:

KSC MEMBERSHIP, 2596 Patrick Henry Drive, Beavercreek, OH 45434

Please Do NOT combine membership payments and trip payments on the same check.