

KITTYHAWK SKI CLUB, INC. MEMBERSHIP APPLICATION

Last Name _____ First _____ MI _____ Spouse/Significant Other Name _____

Street Address _____ City _____ State _____ Zip _____ Home Phone _____ Cell Phone _____

Email Addresses:

Please print carefully!!

<i>INDIVIDUAL INFORMATION</i>	<i>SPOUSE INFORMATION</i>	<i>Type Membership</i>
Nickname:	Nickname:	FIRST YEAR FREE
Birth date – Month: Day:	Birth date – Month: Day:	Individual (\$25)
Occupation:	Occupation:	
Work Phone:	Work Phone:	Family (\$30)
Level Skier:	Level Skier:	Referred by:
Hobbies:	Hobbies:	

Children's Names: _____

I am interested in working with the following club committees:

Ski Trips _____ **Social** _____ **Membership** _____ **Programs** _____ **Summer Activities** _____

Biking _____ **Golf** _____ **Newsletter** _____ **Racing** _____ **Other** _____

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.

Signature _____ **Date** _____

Signature _____ **Date** _____