



MEMBERSHIP APPLICATION
ROCKY MOUNTAIN HIGH SKPS
ESCAPEES CHAPTER 2

Membership in our chapter is by individual. Our annual dues are \$5 per person or \$10 per couple and are payable on or before February 15th. The dues year is January 1 through December 31.

All correspondence from Chapter is sent by email

Full Name: _____ Co Pilot Name: _____

Address: _____

Home Phone _____ Cell Phone: _____ Co Pilot Cell Phone: _____

Primary Email: _____

Co Pilot Email: _____

Do you want e-mail sent to both of the above? If not which one? Primary _____ Co Pilot _____

Escapees SKP# _____

Primary Birthday (Month/Day) _____ Co Pilot Birthday Month/Day) _____

Anniversary (Month/Day) _____

Rig:Type/Make/Model/Length/#Slides _____

Our member directory is only available to other members. Can we publish your information Yes _____ No _____

By submitting this form, you are agreeing to the following:

As an attendee, you assume all risk and danger relating to your personal property, RV, and attendance at any Chapter Event, whether occurring prior to, during, or after the event. In the event of loss or theft, no claim will be made upon Escapees, its volunteers, employees, or agents. Volunteers may be directing and assisting you in your parking areas. It is, however, the driver of the RV or other vehicle who is ultimately responsible for avoiding obstacles or dangerous situations, and is solely responsible for any damages to his/her property or the property of others. As an attendee at any Chapter Event, you are granting your permission to be filmed, videotaped, audiotaped, or photographed, and granting full use without compensation.

Signed _____ Date _____



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WAIVER ONLY FORM

If both you and your copilot have emails do you both want our emails? If not which one should we send them to?

Primary _____ Co Pilot _____

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Signed _____ Date _____