

華人露營健行社 hi-camp Outdoor Activity Club

Membership Application Form

Date: _____

Yes, I (We) want to join Hi-Camp Outdoor Activity Club!

Please enroll me for: Individual one year \$10 three years \$20 five years \$25
 Family one year \$15 three years \$30 five years \$40

_____ Age: <18, 18-29, 30-39, 40-49, 50-59, 60-69, >70
 First Name Last Name

Home: () _____ - _____ Cell: () _____ - _____

Address: _____

City: _____ State: _____ Zip: _____

e-mail: _____

Additional family members (Spouse, Children (under 23) & Elderly Parents):

_____ Age: <18, 18-29, 30-39, 40-49, 50-59, 60-69, >70

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 First Name Last Name Relationship

Please make checks payable to *Kitty Tam*

Send to: Hicamp
 c/o Kitty Tam
 164-13 72 Ave
 Fresh Meadows, NY 11365

How did you hear about us?

Friend
 Website
 Newspaper
 Other (Please specify): _____

Please read an sign second page

Please attach *Liability Release Form* signed by each family member age 18 or older, membership will not be considered without the *Liability Release Form*.

Office use only

	ID	DATE	DATE	DATE	DATE	DATE
_____	Card					
_____	Input					
_____	A/C					

華人露營健行社
hi-camp Outdoor Activity Club

RELEASE OF LIABILITY

This must be signed. Please read carefully

I realize that Hi-Camp Outdoor Activity Club's (Hi-Camp) activities require physical conditioning, and I represent that I am in sound medical condition. I have no physical or medical condition that would endanger either others or myself.

I understand that Hi-Camp Outdoor Activity Club's activity can be a HAZARDOUS activity that has many dangers and risks, including injury, permanent paralysis or death resulting from accident or physical exertion. I understand that Hi-Camp's activity involves a risk of injury, which injuries are a common and ordinary occurrence of the sport, and the risk of serious injury does exist.

I agree, for myself and on the behalf of my heirs, assigns, personal representatives and next of kin, as a consideration of, and in consideration for, being permitted to participate in the Hi-Camp's activities, to freely and expressly assume and accept any and all risks, known and unknown, of injury or death to the activity participant, or property loss or damage, including injury, death, loss, or damage attributable to the negligence of Hi-Camp, its leaders, board of directors, officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, and if applicable, owners and lesser of the premises used to conduct the event.

I agree to release Hi-Camp, its leaders, directors, officers and employees from any and all responsibility or liability for injuries or damages, which result, either directly or otherwise, from my participation in Hi-Camp's activities. I agree not to make a claim against or sue Hi-Camp, its leaders, directors, officers and employees for injuries or damages related to Hi-Camp's activities.

I am aware that this is a release of liability and a contract between the Hi-Camp and myself. I am signing it freely and of my own accord and I recognize and agree that it is binding upon myself, my heirs and assigns, and in the event that I am signing it on behalf of any minors, I have full legal authority to do so, and realize the binding effect of this contract on them, as well as on myself. I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

Name (please print)	Signature	Date
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Name (please print)	Signature	Date
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Name (please print)	Signature	Date
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Name (please print)	Signature	Date
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Name (please print)	Signature	Date
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