



<http://www.outdoorwomen.ca>

## Membership Application Form

YEAR: 20 \_\_\_\_ - 20 \_\_\_\_

NAME: (Please Print) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

PHONE: (\_\_\_\_\_) \_\_\_\_\_ FORUM NICKNAME: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

Annual dues are payable by October 1. Dues are pro-rated **ONLY** for new members who join after April. Please refer to the club's web site for the amount of membership dues.

Amount paid: \_\_\_\_\_ Date: \_\_\_\_\_

Do you prefer to receive a printed copy of the newsletter?  Yes  No

Newsletters are available electronically at the club's web site. A hardcopy will be printed for you only if you check the "Yes" box above. You can change your preference any time by sending a email to [newsletter@outdoorwomen.ca](mailto:newsletter@outdoorwomen.ca).

It is **important** that you **READ AND SIGN THE WAIVER FORM** (see reverse). Membership Application Forms without a completed waiver will NOT be accepted. Please make your cheque payable to the V.O.C.W. Forward this form together with your dues to:

The Treasurer, VOCW  
P.O. Box 2681, Main Post Office  
Vancouver, B.C. V6B 3W8

**Vancouver Outdoor Club for Women**

**DISCLOSURE OF RISK, AGREEMENT TO INDEMNIFY,  
RELEASE & WAIVER FORM**

**ACKNOWLEDGEMENT AND WAIVER OF RISK**

**Assumption of Risk:** The activities of the Vancouver Outdoor Club for Women (hereinafter "VOCW") include but not restricted to the following: cycling, hiking, camping, running, snowshoeing, swimming, skiing, snowboarding, kayaking, and adventure travel in developed or remote areas. These activities involve numerous risks and dangers.

I FREELY AND VOLUNTARILY ASSUME ALL THE AFORESAID RISKS AND HAZARDS, AND THAT, ACCORDINGLY, MY PREPARATION FOR, AND PARTICIPATION IN VOCW ACTIVITIES AND WORKSHOPS SHALL BE ENTIRELY AT MY OWN RISK.

**DISCLOSURE OF RESPONSIBILITIES**

The organizer for a club trip is not a professional mountaineer or other outdoor activities guide, or trained first aid attendant. The function of the organizer is only to organize the trip and ensure that it gets under way. It is expected that each person on a club trip have the necessary skills, experience, fitness, and equipment. Each person is responsible for her own safety, having suitable first aid supplies and for confirming that her equipment is in good working order.

**RELEASE AND WAIVER OF LIABILITY**

IN CONSIDERATION of my being permitted to participate in the activities arranged by the VOCW, I, myself, my heirs, executors, and anyone else who may claim on my behalf HEREBY WAIVE ANY AND ALL CLAIMS, LIABILITY AND DAMAGES I may now and in the future have against the VOCW, its members, trip organizers, and all persons acting under its authority, arising from any and all personal injury, death, property damages or loss sustained by me arising from or in connection with my participation in the activities of the VOCW however caused. I FURTHER HEREBY RELEASE AND FOREVER DISCHARGE the VOCW from and against all demands, claims, actions, damages, costs, and expenses arising from or with respect to death, injury, damages or loss to my person or property and any kind whatsoever, by the NEGLIGENCE or GROSS NEGLIGENCE of the VOCW. I FURTHER AGREE to hold harmless and indemnify the VOCW from any and all liability for any damage or injury to the property or persons of any third party resulting from my involvement in or presence during any of the activities of the VOCW.

I ACKNOWLEDGE that the VOCW, in obtaining this waiver from me is doing so for the VOCW, including its members, trip organizers, and all persons acting under the authority of the VOCW.

In the event that I act in any capacity for the VOCW, I appoint the VOCW as my agent for the purpose of obtaining an indemnity and release of liability from other members of the VOCW or persons participating in its activities.

I CONFIRM THAT I AM THE FULL AGE OF NINETEEN YEARS AND THAT I HAVE READ THIS INDEMNITY AND RELEASE OF LIABILITY AND ACCEPT ITS TERMS, AND IN WITNESS WHEREOF, I have hereunder set my hand and seal, this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Please Print Name

\_\_\_\_\_  
Please Print Name

**!!!! BE AWARE THAT SIGNING THIS FORM MEANS THAT YOU ACKNOWLEDGE AND ACCEPT ALL THE HAZARDS OF THE ACTIVITY YOU ARE PARTICIPATING IN AND THAT YOU ARE GIVING UP ALL RIGHT TO SUE THE VOCW OR ANY OF ITS MEMBERS !!!!**