



# Aurora Nordic Ski Club Membership Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

| List of Members | Pass # | Group | Fee |
|-----------------|--------|-------|-----|
|                 |        |       |     |
|                 |        |       |     |
|                 |        |       |     |
|                 |        |       |     |

Total Paid:

Declaration: I hereby agree to abide by the rules and regulations of the Aurora Nordic Ski Club and to participate in events, activities and games sanctioned by Cross Country Canada in accordance with the association's rules, regulations and by-laws. In consideration of Cross Country Canada association's events, activities and games, I hereby, for myself, my heirs, executors, administrators and assigns, forever release, discharge and hold harmless Cross Country Canada and the Aurora Nordic Ski Club, its directors, officers, employees, representatives or agents.

Signature of Member: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature\*: \_\_\_\_\_

\*All Participants under the age of 18 must have the parent or guardian sign above.