Torrington Ski Club 2018-2019 Season

Membership Form & Terms of Agreement

**\*\*One form per membership card**

**Type**: \_\_\_\_\_\_ Renewal Membership \_\_\_\_\_\_ New Member

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| **Membership Type** | **Price** | **Amount** |
| Family Membership - one card for entire family  includes children under age 18 | $25.00 |  |
| Family Membership Plus College Student  Obtain separate card for adult child in college  Attach proof of college attendance | $25.00 (family)  Plus $5.00 per college student |  |
| Individual Membership - receive individual card | $15.00 |  |
| After December 31st = Late application fee | $10.00 |  |
| **Total** | |  |

**Personal Information**: Adult (1)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Adult(2)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Children: Name and Age** - Attach proof of college attendance (if applicable)

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, THE UNDERSIGNED, IN EXCHANGE FOR THE PRIVILEGES OF MEMBERSHIP, HERE WITH ABSOLVE THE TORRINGTON SKI CLUB FROM LIABILITY FOR ANY MISCONDUCT OR PERSONAL INJURY INCURRED TO OR BY MYSELF. I UNDERSTAND THAT THE TORRINGTON SKI CLUB ASSUMES NO RESPONSIBILITY FOR ANY DAMAGE, INCLUDING PROPERTY DAMAGE OR PERSONAL INJURY I MAY INCUR OR CAUSE TO MYSELF OR OTHERS THROUGH, BY, OR IN CONNECTION WITH MY PARTICIPATION IN ANY EVENT OR ACTIVITY SPONSORED BY THE TORRINGTON SKI CLUB. I WILL NOT MISREPRESENT USE OF CARD.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

**Payment: Check payable to: “Torrington Ski Club”**

**Mail payment and forms to:** Monica Pirotta, 31 Gray Lane, Goshen, CT 06756