

[Return to Membership page](#)

MEMBERSHIP APPLICATION 2018

Because of our Release of Liability clause, it is necessary for us to obtain separate Membership Applications for each member. (Couples may send one check to cover both memberships @ \$20.00 each, but must send individual Membership Applications)

Please complete form and return it along with your check for \$20.00 (payable to SAS) for 2018 dues.

Mail To: SAS, P.O. Box 44795, Madison, WI 53744

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CELL PHONE _____

E-MAIL ADDRESS _____ RETIRED _____ SEMI-RETIRED _____ WORKING _____

NEW MEMBER _____ RENEWING MEMBER _____

Optional Donation _____ How did you hear about Sports for Active Seniors? _____

INTERESTS

Biking _____ Bowling _____ Camping _____ Canoeing _____ Dancing _____ Golf _____
Tennis _____ Hiking/Walking _____ Ice Skating _____ Pickle Ball _____
Skiing (Downhill) _____ Skiing (cross-country) _____ Snow Shoeing _____ Volley Ball _____

If you have sport interests other than are mentioned please list them here. _____

Please check interests you may be willing to help with: Membership _____ Hospitality _____ Programs _____
Newsletter _____ Computer Literacy _____ Activity Leadership _____ Finance _____ Archives _____ Publicity _____

RELEASE OF LIABILITY/INDEMNITY

(Application will not be accepted without this)

I understand that participation in the activities of this organization may put me at risk of injury or loss. I hereby assume such risk, and I release, indemnify, and hold harmless the organization, its officers, its activity leaders, and my fellow participants from all liability for any injuries, damages, claims, or allegation of misadventure or negligence. I agree to indemnify and hold those identified above harmless and pay for all costs, attorney fees and other monetary awards incurred or determined in any lawsuit or claim related to the organization and myself.

Signature _____ Date _____

[Return to Membership page](#)