

2019 Membership Release Form

The Carolina Shag Club

PO Box 17213, Greenville, SC 29606

First Name: _____

Last Name: _____

Address: _____

City: _____

Phone #: _____

Cell #: _____

E-mail: _____

(ALL NEWSLETTERS ARE EMAILED TO OUR MEMBERS)

Birthday [m/d] _____

What Cell Phone Carrier do you use?
(To receive text updates from the CSC)

- Verizon ATT
 T-Mobile Sprint
 Other _____

Membership # _____

Renewal New Member

\$30.00 until March 1

\$35.00 after March 1

Membership fee

Cash \$ _____

Check# _____ \$ _____

PayAnywhere \$ _____

Name Badge (\$6.50) \$ _____

Total paid \$ _____

(No new memberships accepted after December 1 for the current year)

THIS IS A RELEASE, PLEASE READ BEFORE SIGNING

I AGREE THAT THE CAROLINA SHAG CLUB OF GREENVILLE, SC AND THEIR RESPECTIVE OFFICERS, DIRECTORS, EMPLOYEES AND AGENTS (HEREINAFTER THE "RELEASED PARTIES") SHALL NOT BE LIABLE OR RESPONSIBLE FOR INJURY TO ME (INCLUDING PARALYSIS OR DEATH) OR DAMAGE TO MY PROPERTY DURING ANY CAROLINA SHAG CLUB ACTIVITIES, EVEN WHERE THE DAMAGE OR INJURY IS CAUSED BY NEGLIGENCE (EXCEPT WILLFUL NEGLIGENCE). I UNDERSTAND AND AGREE THAT ALL CAROLINA SHAG CLUB MEMBERS AND THEIR GUESTS PARTICIPATE VOLUNTARILY AND AT THEIR OWN RISK IN ALL CAROLINA SHAG CLUB ACTIVITIES, AND I ASSUME ALL RISKS OF INJURY AND DAMAGE ARISING OUT OF THE CONDUCT OF SUCH ACTIVITIES. I RELEASE AND HOLD THE "RELEASED PARTIES" HARMLESS FROM CLUB ACTIVITIES AND EVENTS. I UNDERSTAND THAT THIS MEANS THAT I AGREE NOT TO SUE THE "RELEASED PARTIES" FOR ANY INJURY OR DAMAGE TO MYSELF OR MY PROPERTY RESULTING FROM, OR IN CONNECTION WITH, ANY CAROLINA SHAG CLUB ACTIVITIES OR EVENTS. BY SIGNING THIS RELEASE, I CERTIFY THAT I HAVE READ THIS RELEASE AND FULLY UNDERSTAND IT, AND I AM NOT RELYING ON ANY STATEMENTS OR REPRESENTATIONS MADE BY THE "RELEASED PARTIES".

MEMBER SIGNATURE _____ DATE _____

WITNESS _____ DATE _____