



# Gelandesprung Ski Club of Green Bay

## 2011-12 Membership Form

- RENEWAL       NEW MEMBER  
 WAIVER ONLY

Single \$ 30.00, Married Couple \$ 50.00

Payment \$ \_\_\_\_\_ Check # \_\_\_\_\_

Please “**DO NOT**” publish the following in the Membership Roster:

- Phone number  
 Email address

Would you like to receive a link to the monthly newsletter via e-mail? (**Email address needed**)

Please indicate if you're interested in becoming any or all of the following:

- Trip Leader  
 Committee Member  
 Board Member

**NEW MEMBERS:** How did you hear about the club? Who referred you?  
\_\_\_\_\_  
\_\_\_\_\_

### 2011-12 Waiver

I certify that I am at least 21 years of age and do hereby accept the policies and practices of the Gelandesprung Ski Club. I understand that my participation in club-sponsored events carries a degree of risk of injury or death. I hereby unconditionally waive and release the Gelandesprung Ski Club, its officers, directors, agents and members from any and all liabilities arising from any injuries, property damage or loss I may suffer as a result of my actions. Further, I hereby grant full permission to any and all foregoing to use any photograph, videotape, motion pictures, recordings or other record of any ski club event for any legitimate purpose.

Any additional trip surcharges incurred by the Club will be passed along to those participating on the affected trip(s). Trips are based on double occupancy unless otherwise specified. Single occupancy requests require special arrangements at increased costs, and depend on availability. All monies paid for a trip cancelled by the Club will be refunded. Refunds for cancellation requests will be charged costs that the Club is unable to recover. Refund requests must be submitted in writing or emailing to the Gelandesprung Ski Club Board of Directors at address as listed to the right. Refund requests can be now be emailed to: [gelandesprung@hotmail.com](mailto:gelandesprung@hotmail.com). Treasurer will issue a refund checks. Refunds will only be issued after all of the bills related to the trip have been paid. Trips utilizing airline transportation have additional separate written cancellation policies specific to each trip.

All decisions on refund amounts will be made by the Board of Directors and are final.

Membership Period  
**05/01/11 to 4/30/12**

By submitting this form, I agree that I have read & accepted the trip policies as set forth by Gelandesprung Ski Club. All club policies are posted on the website at [www.Gelandesprung.org](http://www.Gelandesprung.org) or by contacting us by mail at the address below.

Print Name: \_\_\_\_\_  
(Full Proper Name as required for Flights & International Travel)

Birth Date: \_\_\_\_\_  
(Year of birth is required / Club use only & will not be published)

All information requested below is the same as last year

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

Phone: \_\_\_\_\_

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

Signature: \_\_\_\_\_  
**(Couples please Sign Separate Forms)**

Signature Date: \_\_\_\_\_

Emergency Contact Information  
(Someone you don't ski with)

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

Phone # \_\_\_\_\_

Please mail the completed form & dues to:

**Gelandesprung Ski Club**  
**P.O. Box 10422**  
**Green Bay, WI 54307-0422**

*This form can be used as a “Waiver Only”  
Just fill in the “Right” column*