

# CIWC Membership Application

Date \_\_\_\_\_

Contact information will be printed in the annual membership directory.

Name \_\_\_\_\_

- New Membership
- Single Membership (\$25)
- Family Membership (\$35)

Spouse/ Other \_\_\_\_\_

Address \_\_\_\_\_

- Renewal Membership
- Single Membership (\$25)
- Family Membership (\$35)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

We send out quarterly newsletters. How would you like to receive them :

- Paper newsletter
- Electronic newsletter (provide email address below)
- Both

Phone (Preferred) \_\_\_\_\_ Phone (Other) \_\_\_\_\_

Primary email \_\_\_\_\_ Date of Birth \_\_\_\_\_

Spouse/Other email \_\_\_\_\_ Date of Birth \_\_\_\_\_

Where did you hear about us? \_\_\_\_\_

Areas of interest:

- |                                      |                                     |   |
|--------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Backpacking | <input type="checkbox"/> Bicycling  | <input type="checkbox"/> Cross Country Skiing |
| <input type="checkbox"/> Canoeing    | <input type="checkbox"/> Climbing   | <input type="checkbox"/> Trail Maintenance    |
| <input type="checkbox"/> Whitewater  | <input type="checkbox"/> Spelunking | <input type="checkbox"/> Winter Camping       |

## Waiver and Release of Liability

The undersigned hereby releases, discharges and waives any and all actions of personal injury, property damage or wrongful death occurring to him/herself as a result of engaging in activities as a member of the Central Indiana Wilderness Club, Inc. The undersigned agrees that under no circumstance will he/she or his/her heirs, executors, administrators and assigns prosecute or present any claim against the Central Indiana Wilderness Club or any of its members, officers, agents, trip leaders or trip leader designees, for any cause of action, whether the same shall arise by the negligence of any of said persons or otherwise. It is the intention of the undersigned by signing this document to exempt and relieve the Central Indiana Wilderness Club and its agents, members, officers, trip leaders, trip leader designees from liability for personal injury, property damage or wrongful death caused by the negligence of anyone. The undersigned further agrees that he/she will abide by club safety policies and any safety plan developed by the trip leaders. Each participant is responsible to assess whether a specific activity or route is feasible or safe for his or her level of fitness or experience and may elect not to participate in any specific activity at their sole discretion. Also we advise all participants that there is no provision for insurance for loss or damage to any personal items or gear being transported by the Club's van or other vehicle.

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

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

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

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

Visit our website ([www.ciwclub.org](http://www.ciwclub.org)) to pay your dues via PayPal. Otherwise, please make checks payable to Central Indiana Wilderness Club and mail to:

CIWC  
PO Box 44351  
Indianapolis, IN 46244