Membership Application Cowichan Valley Camera Club www.cowichanvalleycameraclub.com

Member	Date:	
Name:	☐ Renewal ☐ N	a
Address:		
City:	Sept 1 st – Aug 31 st	Jan 1 st – Aug 31 st
P.Code: Phone:	☐ \$40.00 Single	☐ \$30.00 Single
Cell:	☐ \$55.00 Family	☐ \$45.00 Family
Email:	\$20.00 Student* * 19 yrs or olde	\$15.00 Student* er with valid student card
Family Memberships	☐ Cash	Cheque
Please fill in information for people in your family membership.	For Club Use Only	Membership Card IssuedName Tag Issued
Partner / Spouse		- Name Tug 133ucu
P/S Name:	Payment of dues can be made at a club meeting OR you can mail an Application Form & a cheque	
P/S Cell:	·	richan Valley Camera Club to:
P/S Email:	CVCC Secre	•
FAMILY MEMBER 1	c/o Jens Lie 1471 Regen	_
FM 1 Name:		BC VOR 1L3
FM 1 Cell:		
FM 1 Email:	<u>Cameras</u>	<u>Software</u>
FAMILY MEMBER 2	DSLR □ yes □ no	☐ Photoshop
FM 2 Name:		☐ Photoshop Elements
	□ Nikon□ Canon	□ Photoshop Lightroom□ Picassa
FM 2 Cell:		☐ Gimp
FM 2 Email:	□ Olympus	☐ Photomatix
FAMILY MEMBER 3	□ Pentax	☐ Aperture or Iphoto (mac)
FM 3 Name:	☐ Other Brand	
FM 3 Cell:		☐ Other Software
FM 3 Email:		
TW 5 Email.	Printing	C Other
	☐ Commercial Lab☐ Home Printer	☐ Other:
Family Memberships:	□ nome Printer	
Members of the same family residing in the same household, including minors for whom you have legal quardianship.	Information about o	and the search and all the searc

Please check where you would like to help □ Presentations ☐ Photo Exhibitions ☐ Tech Equipment Management ☐ Competitions ☐ Greeter for meetings ☐ Field Trips ☐ Hospitality Committee ☐ Tech Night ☐ Meeting setup & clean up ☐ Library ☐ Coffee preparation ☐ I would like to help but don't know where I would fit **NOTE**: Members' **email addresses and cell phone numbers** will be used by the Club Executive to communicate the activities and functions of the club. The addresses of fellow members will be shared with all other active members for the exclusive use of sharing photography concerns. Including your e-mail address and cell phone number on this form indicates your agreement with these terms. Personal member information will not be shared with anyone outside of the CVCC. **Waiver of Liability Release** By signing this form, you accept sole responsibility for your own safety and release the Club, the executive and its members' and its trip and activity leaders ("the Releasees") from all legal responsibility in this regard. Each of the undersigned hereby declare that they are of the full age of 19 years. Any person under 19 years of age must have a legal guardian sign this form on their behalf. Each of the undersigned hereby freely and voluntarily accept full responsibility and forever release and discharge the Releasees on behalf of themselves, their heirs and personal representatives from and against any liability for death or injury to themselves or any minor they have signed on behalf of, or for damage, loss or harm of any property of the Releasees, or any injury or expense to any third party resulting from participation in Club activities, however caused. Each of the undersigned have read and understood this agreement prior to signing it and have received or had the opportunity to receive independent legal advice prior to signing it, and are aware that by signing this agreement are waiving certain legal rights which they, their child or grandchild, (if applicable), their heirs, next of kin, executors, administrators and assigns may have against the any of the Releasees. Signature Member: Date: _____ Date: _____ Signature Spouse/Partner:_____ Date: _____ Signature FM 1: Signature FM 2: Date: _____

Signature FM 3:

This is a volunteer Club. We need volunteers to make the Club run.

** **Note:** A parent or guardian must sign for minors. Minors must be accompanied by a guardian at all Club functions.

Date: _____