Old Salts Seniors Canoe Club
Membership Renewal

OFFFICE USE ONLY: CASH_____
CHEQUE ____ E-TRANSFER ____

MEMBERSHIP $55

First Name: _____ Last Name: _____

Address: _____

City: _____ Postal Code: _____

Email: (Please Print) _____

Home Phone: Cell:

VOLUNTEERING: The **success** of the OSSCC **depends on its volunteers**! **All** members are **expected** to participate in the running of the club in some capacity. Training workshops will be offered to show what is involved. **Please check at least one area** of interest in which you could help:

Scouting new rivers/lakes ____
Trip Organizer/Leader (Intermediate Trips) ____
Flat Water Organizer/Leader (Easy-Breezy) ____
Equipment & Maintenance ____
Social Events Committee ____
Towing (to and from canoe excursions) ____
Cartopping (if required) ____

Please Note: It is the responsibility of the member to carry on his/her person (or dry sack when canoeing), the OSSCC "***Emergency Contact Card***" listing pertinent information in the event of an emergency. i.e. contact info, medications, medical conditions, allergies, etc., and to wear a medic alert bracelet on all Club activities.

I have a current First Aid / CPR certification. Yes Expiration Date: _____ No

I would be interested in obtaining First Aid / CPR certification if offered Yes No

Signed Membership Renewal/Waiver forms & membership fees are required to complete your registration. Cheques are payable to: ***Old Salts Seniors Canoe Club.*** Please mail Renewal Forms (both sides) & membership fees to ***Old Salts Seniors Canoe Club, 55 Northfield Dr. East, Suite 242, Waterloo, ON N2K 3T6, or*** *bring to the Membership Registration Meeting*. ***E-Transfers*** *to treasurer@oldsaltsclub.com may be paid at the meeting or before.* ***Include your name & what the money is for (membership fees) in the Message box before sending***.

*Note: A separate Training Registration Form with training information will be sent to members.

(See Page 2 to read and sign Membership Agreement & Privacy Waiver)

0SSCC MEMBERSHIP AGREEMENT & PRIVACY WAIVER

I authorize the Old Salts Seniors Canoe Club (hereafter specified as the "Club") to collect and retain the personal information as recorded on this form.

I authorize the Club to use this information for the sole purpose of the operation of the Club and its activities, and to comply with the membership requirements of the Club. I further authorize the Club to include this personal information in a membership list that will be available to other members of the Club.

1. I understand that my email will **only** be used as a communication tool to inform me of Club events and provide me with important information concerning to Club related activities. I understand that by providing my email to the Club, I will automatically be subscribed to the Club Blog, but have the option to "unsubscribe" from receiving emails; I also understand that by doing so, it will be my responsibility to check the blog on my own to receive Club updates and information.
2. I also undertake to never disclose any personal information relating to another member of the Club.

CONDITIONS OF MEMBERSHIP

(Release of Liability, Waiver of Claims, Assumption of Risk and Indemnity Agreement, Conditions of Membership)

I **acknowledge** and **agree** that:

1. I am participating voluntarily in the sport of canoeing organized by the Club. I agree, as a precondition to my participation in the Club, that I will be strictly bound by the terms of this Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement, and Conditions of Membership.
2. I fully understand that participating in canoe activities organized by the club might involve inherent risks and dangers that could cause serious injury and possible death to participants and take full responsibility for myself and my actions,.
3. I assume responsibility for all risks, dangers and hazards related to canoeing activities planned by the Club.
4. I alone am responsible for the welfare and safekeeping of myself, and any family members or guests I bring with me to Club canoeing activities.
5. I hereby waive any and all claims which I may have against the Club, their Executive, trip leaders, trip coordinators, and activity organizers, trainers (hereafter called "Agents"), and release the Club and the Agents from all liability for injury, death, property damage or any other loss sustained by me as a result of my participation in Club canoeing activities, due to any cause what so ever, including negligence, breach of contract, or breach of any statutory or other duty of care by the Club and/or the Agents.
6. All expenses associated with non-scheduled or emergency evacuation, rescue or first aid will be my responsibility and will not be covered by the Club or Agents. It is my responsibility to carry with me a completed and up to date "**Emergency Contact Card**" listing my medical conditions, medications and contact information in case of emergency.
7. I will always wear an approved personal floatation device (PFD), fully done up while participating in any on-water canoeing activity,
8. It is my responsibility to ensure that I have the physical ability, swimming ability, skill level and training to participate in canoeing activities planned by the Club. This includes but is not limited to taking mandatory training required for new members to assess skill levels and refresher training to maintain skill levels as required.
9. I will read and abide by Club rules as set forth in the "**Old Salts Seniors Canoe Club (OSSACC) Club Handbook/Rules**". (available in .pdf form on Club Blog)
10. I am also aware that my participation in the activities of the Club may put me at an elevated risk of contracting or being exposed to viruses or other illnesses that may be present in the general population and/or in public spaces, and that I nevertheless choose to participate in the activities and fully assume the risk of doing so. I agree to take whatever precautions necessary to protect myself and fellow club members.

I HAVE READ THIS AGREEMENT AND UNDERSTAND IT. I AM AWARE THAT I AM SIGNING THIS AGREEMENT FOR **MYSELF** AND **ANYONE** ENTITLED TO ACT ON MY BEHALF. I UNDERSTAND THAT THIS DOCUMENT CONTAINS A PROMISE NOT TO SUE THE CLUB AND/OR AGENTS AND THAT IT CONSTITUTES A RELEASE OF LIABILITY AND AN INDEMNITY FOR ALL CLAIMS.

_____

Member Name (Please Print)

_____ _____

Signature (Required) Date