MASON-DIXON CANOE CRUISERS. INC. JOIN@MASONDIXONCANOECLUB.COM

APPLICATION AND LIABILITY WAIVER: CAUTION: THIS IS A WAIVER. READ CAREFULLY BEFORE SIGNING.

Name(s):	Family Members:	
Address:		
Home/Cell phone:	E-Mail:	
Optional Emergency Contact Name:	E-Mail: Phone:	
Check this box if you d	o not want your contact information included in t	he membership roster.
	le to Mason-Dixon Canoe Cruisers. Payment type	
(hereinafter referred to as the 'Club'), Intend member of my family and anyone else claimin damage which I may have, or which may here	lication for participation in events sponsored by the ding to be legally bound, I hereby waive, releaseing through me, any and all claims for damages for after accrue to me against the club, its members, the in a club-sponsored event. This waiver applies to affety or well-being.	e, and discharge, for myself and an r death, personal injury or property crip coordinators, or any other of my
fellow paddlers to feel free to donate our ser	ng the Club to exist and to serve the paddling comr vices and help each other without fear of liability. rs of the Club. My waiver has no expiration date.	· · · · · · · · · · · · · · · · · · ·
participants to various hazards; 2) no one but challenge my capabilities by boating on a part ability when they appear to need such assistat myself. I further understand that this does not to me. I also declare that I shall abide by all	accept the following facts of life on the river: 1) but myself is responsible for judging my qualification ticular river or a particular rapid: 3) I may assist mance - but only so long as I can do so, in my judge imply any legal duty for me to do so, nor for anyo I applicable boating laws and regulations and will proper personal protection/safety gear, helmet, PF	ons for my safety when I choose to ny fellow paddlers to the best of my ment, without significant danger to one else who renders such assistance Il practice courtesy and safety whil
	strives to be a family friendly organization that in an environment without harassment or abuse	
If you experience or witness any of the follow Board, please report it to any MDCC Officer or	ing behavior at a MDCC event or activity, or on th Board of Directors member.	e MDCC facebook page or Message
	nder identity, or sexual orientation njoyment of participation for other people ntionally hurtful, harmful, threatening or inappropr	iate
review by the MDCC Officers and Board of Dire	towards offensive or abusive language or actions ectors, any violation of the Code of Conduct may retivities. MDCC reserves the right to revoke the n	esult in termination of membership,
sponsored event which may be deemed neces	may be considered necessary in the event of a sary by club members or medical personnel. I rep rized to execute this waiver on behalf of my family	resent to the Club that I an over the
Signature(s) of applicant(s)		Date
Signature(s) of applicant(s)		Date
Parent/Guardian Signature		Date

(If applicant is under 18 years of age)