

MASON-DIXON CANOE CRUISERS. INC.  
PO Box 223,  
Boonsboro, MD 21713

<http://masondixoncanooclub.com>  
mdccmembership@gmail.com

Application and Liability Waiver  
**CAUTION: THIS IS A WAIVER. READ CAREFULLY BEFORE SIGNING.**

Name(s): \_\_\_\_\_

Family Members: \_\_\_\_\_

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

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

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Check this box if you do not want your contact information included in the membership roster.

**Annual dues are \$10 per household, payable to Mason-Dixon Canoe Cruisers.**

In consideration of the acceptance of my application for participation in events sponsored by the Mason-Dixon Canoe Cruisers, Inc. (hereinafter referred to as the 'Club'), Intending to be legally bound, I hereby waive, release, and discharge, for myself and any member of my family and anyone else claiming through me, any and all claims for damages for death, personal injury or property damage which I may have, or which may hereafter accrue to me against the club, its members, trip coordinators, or any other of my fellow paddlers as a result of my participation in a club-sponsored event. This waiver applies to any negligent act or omission and any intentional act intended to promote my safety or well-being.

This waiver is given in the interest of permitting the Club to exist and to serve the paddling community, and to entitle myself and my fellow paddlers to feel free to donate our services and help each other without fear of liability. My waiver is given in exchange for similar waivers to be granted by other members of the Club. My waiver has no expiration date.

I hereby declare that I fully understand and accept the following facts of life on the river: 1) boating on whitewater rivers exposes participants to various hazards; 2) no one but myself is responsible for judging my qualifications for my safety when I choose to challenge my capabilities by boating on a particular river or a particular rapid; 3) I may assist my fellow paddlers to the best of my ability when they appear to need such assistance - but only so long as I can do so, in my judgment, without significant danger to myself. I further understand that this does not imply any legal duty for me to do so, nor for anyone else who renders such assistance to me. I also declare that I shall abide by all applicable boating laws and regulations and will practice courtesy and safety while boating. I am also aware that the wearing of a proper personal floatation device is recommended on all trips where conditions so dictate, and even required by some states.

I consent to any emergency treatment that may be considered necessary in the event of an injury or illness during any club-sponsored event which may be deemed necessary by club members or medical personnel.

I represent to the Club that I am over the age of eighteen (18) years and that I am authorized to execute this waiver on behalf of my family.

Signature(s) of applicant(s) \_\_\_\_\_ Date \_\_\_\_\_

Signature(s) of applicant(s) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*(If applicant is under 18 years of age)*