

# MEMBERSHIP FORM / GROOMER DONATION / LIABILITY WAIVER

Checks should be made payable to SONC.

Please mail to Bobbie Plummer, 3368 Siskiyou Blvd., Ashland, OR 97520

Household Membership: \$ 20.00 check # \_\_\_\_\_ date \_\_\_\_\_  
Groomer Donation Fund: \$ \_\_\_\_\_ (for grooming the road from Hyatt to Buck Prairie)  
TOTAL \$ \_\_\_\_\_

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

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

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

Phone: \_\_\_\_\_ Email \_\_\_\_\_

SONC will not share your personal information with anyone outside of the club. Name only will be furnished to outdoor stores giving member discounts unless you decline by checking here ☐.

SONC publishes a contact list for members only with name, phone number and email. Check here if you do not want to be included on this list ☐.

Number in Family Participating (**All must sign below**) Adults \_\_\_\_\_ Children \_\_\_\_\_

Ski Interests: ☐ Family Tours, ☐ Snowshoe, ☐ Back Country Tours, ☐ Back Country Telemark,  
☐ Lift Assisted Telemark, ☐ Racing, ☐ Groomed Trails, ☐ Winter Camping, ☐ Skate Skiing

Would you: ☐ Lead an outing, ☐ Co-lead an outing, ☐ Organize work party, ☐ Participate in work party?

## Assumption of Risk and Liability Waiver

Outdoor adventures by their very nature are inherently dangerous and involve some degree of risk. I am aware that participating in the Oregon Nordic Club's activities may expose me to certain risks and dangers including, but not limited to the hazards of mountainous, aquatic, or wilderness terrain, accident, illness, the forces of nature, and travel to and from the activity location or point of departure. I am aware that it is not possible to foresee all of the potential hazards of outdoor activities. Each participant in a Nordic activity is responsible for his or her decisions.

To the best of my knowledge, I feel physically and mentally able to assume full participation in the activities in which I will participate. I understand that the Oregon Nordic Club is a volunteer organization and that trip leaders do not have medical or rescue training. In consideration of voluntarily participating in this outing, trip, or activity, I have and do hereby assume all the risks inherent in these activities and agree to hold harmless, from and against any and all liability, claims, and demands of any nature, including but not limited to liability for negligence, the Oregon Nordic Club, and any of their agents, tour leaders, officers, assistant leaders, instructors, and other participants.

I acknowledge that ORS § 30.975 provides that an individual who engages in the sport of skiing, alpine or Nordic, accepts and assumes the inherent risks of skiing insofar as they are reasonably obvious, expected or necessary. Inherent risks of skiing include, but are not limited to, those dangers or conditions which are an integral part of the sport, such as changing weather conditions, variations or steepness in terrain, snow or ice conditions, surface or subsurface conditions, bare spots, creeks and gullies, forest growth, rocks, stumps, lift towers and other structures and their components, collisions with other skiers, and a skier's failure to ski within the skier's own ability.

I have read and understand the statements on this page concerning the Oregon Nordic Club's Outing Program.

\_\_\_\_\_  
PRINT YOUR NAME

\_\_\_\_\_  
SIGN YOUR NAME

\_\_\_\_\_  
PRINT YOUR NAME

\_\_\_\_\_  
SIGN YOUR NAME

\_\_\_\_\_  
PRINT YOUR NAME

\_\_\_\_\_  
Signature (if participant is a minor, participant's Guardian must sign.)