

# 2012 Membership Application

Date \_\_\_\_\_



NEW \_\_\_\_\_ RENEWAL \_\_\_\_\_

FULL \_\_\_\_\_ PART \_\_\_\_\_ TIME RESIDENT

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

LOCAL PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_ Receive News: \_\_\_\_\_ YES \_\_\_\_\_ NO

E-MAIL \_\_\_\_\_ Calendar Updates: \_\_\_\_\_ YES \_\_\_\_\_ NO

SINGLE \$ 15.00 \_\_\_\_\_ FAMILY \$ 20.00 \_\_\_\_\_ \$ \_\_\_\_\_

Optional Contribution: Education Fund (Tax Deductible) \$ \_\_\_\_\_

Optional Contribution: Upper San Juan Search & Rescue (Ditto) \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

Mail to: SJOC  
PO Box 3856  
Pagosa Springs, CO 81147

You have my permission to post my contact info on SJOC Web Site \_\_\_\_\_ YES \_\_\_\_\_ NO

**PLEASE READ THIS:** I, the undersigned (parent, if child is under 18 years old), am in good physical condition for any activity I participate in and accept full responsibility for my own safety during this outing. I waive any claim against, and hold harmless, the San Juan Outdoor club, the event Leader(s)/Organizer(s), or any property owner whose land may be visited, for any and all accidents or injuries that may arise in connection with this outing. I also authorize whatever medical attention may be advisable in case of injury. I also acknowledge that it is advisable, and my responsibility, to bring along any necessary personal equipment and supplies, such as First aid, Colorado Search and Rescue Card, rain gear, two-way radios, compass, maps, GPS, etc.

I also understand the event Leader has the right to not allow a person to participate in an activity if in the Leader's opinion the person is not prepared or does not have the ability to participate in the activity.

**Please Sign and Print Name Below**

Date: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_ PRINT

\_\_\_\_\_  
\_\_\_\_\_ PRINT