

Membership Application

Greater Charleston Ski Club * P.O. Box 21229 * Charleston, SC 29413

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE (HOME) _____ (OFFICE) _____

E-MAIL _____ (required unless yes is checked below)

**** Mail hard copy of newsletter? YES ___ NO (email only) ___ (if yes add \$5 to membership fee)

NAME OF SPOUSE _____

NAME / AGES OF CHILDREN (under 21) _____

The clubs year runs October 1, through September 30th. Renewals are accepted August 1 through October 31st.

New Member rates apply to renewals after November 1st (fee charged for return checks \$25 minimum)

				Total Due
MEMBERSHIP	NEW FULL-YEAR	SINGLE (age 21 and older)	\$40.00 + _____	\$ _____
FEES***	HALF-YEAR APRIL 1 - SEPT 30th		\$30.00 + _____	\$ _____
AND				
CATEGORIES	NEW FULL-YEAR FAMILY		\$55.00 + _____	\$ _____
	HALF-YEAR APRIL 1 - SEPT 30th		\$45.00 + _____	\$ _____
	RENEWALS	SINGLE	\$30.00 + _____	\$ _____
		FAMILY	\$45.00 + _____	\$ _____

**** NEWSLETTER HARDCOPY MAILED \$ 5.00 ADDED TO MEMBERSHIP ****

*****Membership residing outside Charleston, Berkeley and Dorchester Counties subtract \$5.00 dollars from all categories*****

SKIING ABILITY

APPLICANT	SPOUSE	WHERE WOULD YOU LIKE TO CONTRIBUTE YOUR TIME		
_____	_____	Non-Skier	Program	Membership
_____	_____	Beginner	Social	Ski School
_____	_____	Intermediate	Newsletter	Publicity
_____	_____	Advanced	Racing	Trips
_____	_____	Expert	Welcoming	Scrapbooks

GCSC welcomes applicants interested in snow skiing and other year round activities. All applicants must be approved by the Board of Directors. In the interest of safety and the enjoyment of all, members are expected to act responsibly. Members may be removed by the Board of Directors if they are not acting in the best interest of the club. (GCSC Bylaws).

RELEASE AND HOLD HARMLESS AGREEMENT:

I do hereby absolve, release and waive any and all liability claims or demands against the Greater Charleston Sid Club, Inc., its officers, directors and each and every member thereof, which may arise out of or be related to any injury, damage, or pecuniary loss to me or to any member of my family by such club membership and participation in club sponsored activities.

(This application must be accompanied by signatures to be considered valid)

Applicant's Signature: _____

Spouse's Signature: _____

Club Member Reference: _____

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Club use only: **TYPE OF MEMBERSHIP:** S _____ F _____ No. Adults _____ NEW _____ RENEWAL _____

Check no. _____ Ck/Cash amount _____ Date _____ BY _____