



Artist Association of Elk Grove Village Membership Application

One Year Membership
June 1, 2021 - May 31, 2022



Annual Fee: \$25.00

Name _____
Street _____
City _____
State _____ Zip Code _____
Phone _____
E-mail Address _____
Your Preferred Media _____

Is there a Chicago area artist that you would like to present a demo at our monthly meeting or have as a workshop leader?

Artist Name _____ Media _____
Contact Information _____

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program/activity (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Elk Grove Park District, including its officials, agents, volunteers and employees. I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Signature of Participant or Guardian (if participant is under 18)

Date

Payment and completed application can be returned to the Elk Grove Park District.

Please make check payable to: **Elk Grove Park District**

Mail to:
**Attn: Customer Service
Elk Grove Park District
1000 Wellington Ave.
Elk Grove Village, IL 60007**

FOR OFFICE USE ONLY

Check # _____ Charge _____ Cash _____ Sold by _____ Date _____ Main Contact # _____