



**Artist Association of Elk Grove Village  
Membership Application**

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One Year Membership  
June 1, 2022 - May 31, 2023

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 # \_\_\_\_\_