

Shooting Creek Basket Guild

Membership Application

(Annual Dues April 1st-March 31st: \$35 Payable by cash or check to the treasurer)

Name:

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Last

First

Nickname

Mailing Address:

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Street

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City

State

Zip

Phone:

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Mobile:

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Email:

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Emergency Contacts:

Contact:

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Phone:

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Local Resident

Contact:

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Phone:

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Local Resident

Waiver:

By signing below, I acknowledge and accept that my participation in Shooting Creek Basket Guild involves inherent risks, including personal injury, property damage, and other potential losses, regardless of the precautions taken. For myself, my heirs, and my assigns, I hereby voluntarily and completely release, waive, and discharge Shooting Creek Basket Guild and its officers and agents from any and all claims, demands, or causes of action arising from or related to my participation, whether caused by negligence or otherwise, to the maximum extent permitted by law.

Signature:

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Date:

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(can type name on electronic format)

Please watch your email for a link to the members section at shootingcreekbaskets.com where you will find guild information, bylaws and project details