## Oregon Treasure Trail Society (OTTS Club) – Membership Application RELEASE OF LIABILITY, WAIVER OF LEGAL RIGHTS AND ASSUMPTION OF RISK

Year: please consider have included the proper dues as shown below.	r my application for membership/renewal. l
Name(s):	[ ] New [ ] Renewal
Address:	
City: State	te:Zip:
E-Mail:	DOB:
Day and times available to detect with other members (i	f interested)
Signature of Applicant(s):	
Membership Dues must accompany application when su	ubmitted:
Dues Schedule – The Oregon Treasure Trail Society off	ers three membership categories:
Individual Senior (18 years of age and older): \$30.00 Individual Junior (17 years of age and younger): \$20.0) Couples (Limit 2): \$50.00 Newsletter via snail mail: \$12.00	
Total:	=======================================
Date: Amount Enclosed: \$	[ ] Check #:[ ] Cash
To join the club, please bring the completed membership send to (please do NOT send cash through the mail, use	
Oregon Treasure Trail Society c/o OTTS Treasurer 10350 N. Vancouver Way #221 Portland, OR 97217	
	Treasurer's Initials
[ ] I wish to receive the monthly newsletter by US Manewsletter copying and postage.	il. Please include \$12 to cover the cost of

**¥** Please complete the other side **¥** 

## Oregon Treasure Trail Society (OTTS Club) – Membership Application RELEASE OF LIABILITY, WAIVER OF LEGAL RIGHTS AND ASSUMPTION OF RISK

In consideration of being allowed to participate in club activities sponsored by **the Oregon Treasure Trail Society** (OTTS CLUB), I hereby understand and agree to this release of liability, waiver of legal rights, and assumption of risk and to the terms hereof as follows:

1. I acknowledge that **metal detecting and club sponsered activities** is a recreational activity and such

activity is subject to mishap and even injury to participants is possible. I further understand and acknowledge that the <b>OTTS Club</b> activities may have inherent dangers that no amount of care, caution, instruction or expertise can eliminate and I EXPRESSLY AND VOLUNTARILY ASSUME ALL RISK OF DEATH OR PERSONAL INJURY SUSTAINED WHILE PARTICIPATING IN <b>Oregon Treasure Trail Society club hunts and parti</b> ACTIVITIES WHETHER OR NOT CAUSED BY THE NEGLIGENCE OF THE RELEASED PARTIES.	
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<b>2.</b> I take full responsibility for, RELEASE AND HOLD HARMLESS <b>the Oregon Treasure Trail Society</b> , the owners, officers, elected officials, agents and members from any and all liability, claims, demands or causes action that I may hereafter have for injuries or damages arising out of my participation in <b>any and all club</b> activities, included, but not limited to, losses CAUSED BY THE NEGLIGENCE OF THE RELEASED PARTIES.	of
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<b>3.</b> I further agree that I WILL NOT SUE OR MAKE CLAIM against the Released parties for damages or other losses sustained as a result of any injury, or death, sustained from my participation in <b>OTTS Club</b> activities also agree to INDEMNIFY AND HOLD THE RELEASED PARTIES HARMLESS from all claims, judgments and coincluding attorney's fees, incurred in connection with any action brought as a result of participation in <b>OTTS Club</b> activities by any of the undersigned.	s. I osts
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<b>4.</b> I hereby expressly recognize that this Release of Liability, Waiver of Legal Rights, and Assumption of Risk contract pursuant to which I have released any and all claims against the Released Parties resulting from an injury, or death, sustained from participation in <b>OTTS Club</b> activities including any claims for negligence of Released Parties.	У
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<b>5.</b> I further represent that I am at least 18 years of age, I waive and release any and all legal rights that ma accrue to me as the result of any injury I may suffer while engaging <b>in any club sponsored</b> activities.	ı <b>y</b>
Initial here 🗵	
I HAVE READ THIS RELEASE OF LIABILITY, WAIVER OF LEGAL RIGHTS AND ASSUMPTION OF RISK AND FUNDERSTAND ITS CONTENTS. I SIGN IT OF MY OWN FREE WILL.	JLLY
On this the day,ofOf20 Signature of Adult Participant: (Print) Name of Adult Participant:	
Signature of Adult Participant: (Print) Name of Adult Participant:	
(Print) Name of Child Released by Adult Signature: Relationship to Child:	