

**CORBEAU SKI CLUB**  
**Membership**  
**May 1, 2018 to April 30, 2019**

**Mail Payment to:**  
**Corbeau Ski Club**  
**P.O. Box 17140**  
**Cincinnati, Ohio 45217**  
**OR**  
**Gerlon Smith**  
**Membership Director**  
**3471 Vine Street**  
**Cincinnati, Ohio 45220**

**Due no later - October 1, 2018**  
 \_\_\_\_\_ **New Membership**  
 \_\_\_\_\_ **Renewal Membership**  
 \_\_\_\_\_ **Returning Past Member**

Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Email Address \_\_\_\_\_ Occupation \_\_\_\_\_

<u>Membership (1 Year)</u>	<u>Membership Fee</u>
<input type="checkbox"/> <b>Family:</b> Two Adults (or Single Adult) & dependent children	\$55.00
<input type="checkbox"/> <b>Single:</b> Individual (married or single)	\$40.00
<input type="checkbox"/> <b>Youth:</b> Without Parent or Guardian	\$20.00

**Family Members**

<b>Name</b>	<b>Relationship</b>	<b>Birth Date</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**LIABILITY WAIVER:**  
 By signing below, I hereby release Corbeau Ski Club, Inc., its affiliates, officers, directors, members and volunteers from any liability, damages or claims arising from personal injury or property damage sustained by me and all family members (Minors) named above related to any Corbeau Ski Club, Inc. ski/winter sports activity or other event. All adult family members (21 and over) must sign below. Young Adult age 21 to 23 residing at home may be included in family membership. Age 24 plus is individual.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_