



2010 - 2011 Season Adirondack Luge Club

c/o Bill Dearborn
10 Carriage Hill Rd.
Epsom, NH 03234

Membership Application

Membership Year: July 1, 2010 through June 30, 2011 Today's Date: ___ / ___ / ___

This application is for (please select one): Membership Renewal New Membership

Membership Type (please select one):

- | | |
|---|--|
| <input type="checkbox"/> Adult Athlete\$40.00 | <input type="checkbox"/> Official/Coach.....\$40.00 |
| <input type="checkbox"/> Youth Athlete (see note below).....\$20.00 | <input type="checkbox"/> Supporting Member\$40.00 |
| <input type="checkbox"/> Family Membership.....\$60.00 | <input type="checkbox"/> Try Luge (Includes sled rental).....\$45.00 |

**Youth Athlete is 14 years or younger as of January 1 of the applicable sliding season. Each Youth Athlete is REQUIRED to have one parent who is a club Supporting Member which is offered at no additional cost.*

Personal Information (Please print legibly)

Name: _____ Last _____ First _____ MI _____ Home Phone: (____) _____

Address: _____ Cell Phone: (____) _____

City: _____ State: ____ Zip: _____ Office Phone: (____) _____

Email: _____

Occupation: _____ Employer: _____

Date of Birth: mm / dd / yy Current Age: _____ Gender: Male Female

Height: ____ feet ____ inches Weight ____ lbs Number of years sliding: _____

USLA Member: Yes No Athlete Status: Master Senior Junior Non-Athlete

Name of parent that will be a Supporting Member for Youth Athletes: _____

All athletes must provide the following information:

Health Insurance Company: _____ Phone: (____) _____

Policy / ID Number: _____ Group Number: _____

In case of accident or emergency, please contact:

1. Name: _____ Relationship: _____

Address: _____

Phone 1: (____) _____ Phone 2: (____) _____

2. Name: _____ Relationship: _____

Address: _____

Phone 1: (____) _____ Phone 2: (____) _____



**ASSUMPTION OF RISK AGREEMENT, WAIVER,
RELEASE OF LIABILITY AND INDEMNITY AGREEMENT**

THIS IS A LEGAL DOCUMENT. READ ALL PAGES OF THIS FORM BEFORE COMPLETING.
If participant is under 18 years of age, PARENT / GUARDIAN must also initial and sign where indicated.

In consideration for being permitted to participate in the sport of luge, luge training programs, luge racing competition, "wheel training" on dry land hills, general athletic and spots training, and related events and activities (hereinafter collectively referred to as "luge activities"), held by or through the ADIRONDACK LUGE CLUB, INC., I, _____ Date of Birth: ___ / ___ / ___
(name of participant)
residing at _____ hereby agree as follows:

1. ASSUMPTION OF RISK. I acknowledge and agree that by participating in luge activities I risk SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, DISMEMBERMENT, AND DEATH, and understand that such consequences may result not only from my own actions, inactions, or negligence, but may be caused by the actions, inactions, or negligence of others, the rules of play, the conditions of the premises, or because of equipment. There may be other risks that may not be foreseeable. I understand and acknowledge that luge activities have inherent dangers that no amount of care, caution, coaching, or expertise can eliminate, and I EXPRESSLY AND VOLUNTARILY ASSUME ALL RISK OF DEATH OR PERSONAL INJURY SUSTAINED WHILE PARTICIPATING IN LUGE ACTIVITIES WHETHER OR NOT CAUSED BY THE NEGLIGENCE OF THE RELEASED PARTIES. (_____) (_____)
Initial Parent

2. EXEMPTION FROM LIABILITY. I exempt and release ADIRONDACK LUGE CLUB, INC., UNITED STATES LUGE ASSOCIATION, UNITED STATES OLYMPIC COMMITTEE, STATE OF NEW YORK, OLYMPIC REGIONAL DEVELOPMENT AUTHORITY, other luge or sports organizations conducting or participating in luge activities, landowners and their lessees and licensees of premises on which luge activities are conducted, and their respective administrators, officers, directors, coaches, employees, agents, as well as other luge participants, sponsoring agencies, sponsors, advertisers, manufacturers of equipment, and suppliers (hereinafter collectively referred to as "Released Parties"), from any and all liability, claims, demands or actions or causes of action whatsoever arising out of any damage or loss to property, or personal injury or death, while on or off the premises, or while participating in luge activities, or while observing such activities, or while being transported to or from such activities, or during or as a result of any rescue efforts or the administering of any first aid or medical treatment contemplated by this Agreement, whether such loss, damage, injury, or death results from the negligence, either active or passive, of the Released Parties or from some other cause. (_____) (_____)
Initial Parent

3. COVENANT NOT TO SUE. I agree never to institute any suit or action at law or otherwise and hereby instruct my heirs, executors, and administrators never to institute any suit or action at law or otherwise against the released Parties, not to initiate or assist the prosecution of any claim for damages or cause of action which I, my heirs, executors, or administrators may have by reason of any injury or death to me or loss or damage to property arising from the activities contemplated by this Agreement. In the event a suit or action is initiated, at law or otherwise, I agree to be responsible for any and all



attorney's fees and expenses incurred by the Released Parties. () ()
Initial Parent

4. INDEMNITY AGAINST THIRD PARTY CLAIMS. I will indemnify, save and hold harmless the Released Parties from any and all losses, claims, actions, or proceedings of every kind and character, including attorney's fees and expenses, which may be presented or initiated by any other persons or organizations, and which arise directly or indirectly from any of my acts or omissions connected in any way with the activities contemplated by this Agreement.

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Initial Parent

5. CONTINUATION OF OBLIGATIONS. I agree and acknowledge that the terms and conditions of the foregoing ASSUMPTION OF RISK, EXEMPTION FROM LIABILITY, COVENANT NOT TO SUE, AND INDEMNITY AGAINST THIRD PARTY CLAIMS, as well as all other provisions on both pages of this Agreement, shall continue in full force now and in the future at all times during which I participate, either directly or indirectly, in the activities of the Released Parties and shall be binding upon my heirs, executors, and administrators of my estate. This Agreement may not be changed orally.

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Initial Parent

6. MEDICAL STATEMENT. I understand that luge activities are strenuous, and acknowledge that I am mentally and physically fit to engage in these activities. If I ever have any doubt as to my mental or physical fitness to engage in luge activities, I will refrain from participating. I understand that ADIRONDACK LUGE CLUB, INC. strongly recommends that I obtain periodic comprehensive medical examinations in order to evaluate my physical and mental fitness to engage in luge activities. I agree never to participate in luge activities while under the influence of alcohol or drugs.

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Initial Parent

7. MEDICAL INSURANCE. I understand that ADIRONDACK LUGE CLUB, INC. requires every participant to maintain adequate medical insurance coverage at all times while participating in luge activities. I agree to maintain such coverage. () ()

Initial Parent

8. LUGE RUN CONDITIONS. I understand that conditions on luge runs vary constantly because of weather conditions, slider use, and luge run maintenance, and that variations in the contour of the run and / or ice surface could exist throughout the run. I also acknowledge that spectator activity could result in hazardous conditions throughout the run. I agree that prior to participating, I will always inspect the entire length of the luge run, facilities, and equipment to be used, if, at any time, I believe that anything is unsafe, I will immediately advise the coach or supervisor of such condition(s) and refuse to participate.

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Initial Parent

9. WAIVER. I understand that by entering into this Agreement, I am giving up substantial legal rights which I may otherwise have.

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Initial Parent



I HEREBY CERTIFY THAT I HAVE CAREFULLY READ ALL PAGES OF THIS ASSUMPTION OF RISK AGREEMENT, WAIVER, RELEASE OF LIABILITY AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS CONTENTS, AND DO FURTHER INTEND TO BE LEGALLY BOUND HEREBY FOR MYSELF, MY HEIRS, ADMINISTRATORS, AND EXECUTORS.

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Initial Parent

DATED: / /
month day year

SIGNATURE: _____

Parent / Guardian must agree to the following if participant is under 18 years of age:
THE ABOVE NAMED MINOR HAS MY PERMISSION TO PARTICIPATE AND I AGREE FOR MYSELF AND SAID MINOR TO BE BOUND BY ALL OF THE ABOVE TERMS AND CONDITIONS.

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Parent

DATED: / /
month day year

GUARDIAN SIGNATURE: _____
Parent or Guardian

I AGREE TO INDEMNIFY ALL RELEASED PARTIES FROM ANY LOSS WHICH THEY MAY SUSTAIN AS A RESULT OF SAID MINOR'S PARTICIPATION / OBSERVATION. ()
Parent

DATED: / /
month day year

SIGNATURE: _____
Parent or Guardian

RETURN APPLICATION TO:
Adirondack Luge Club
c/o Bill Dearborn
10 Carriage Hill Rd.
Epsom, NH 03234