Blue Ridge

SKI & OUTING CLUB

Membership application

Adventure... in good company.

Apply & pay online

☐ Individual - $18 / year (one adult)

☐ Family - $30 / year (one household)

PRIMARY HOUSEHOLD MEMBER

First name

Last name

Email for your account and club communications

Phone (optional)

Date of birth (MM/DD/YYYY)

The Primary Household Member must be at least 18. Family Membership covers people of all ages who live at the same physical address.

Street address and apartment / unit

City

State

Postal code

Activities you enjoy (optional): skiing, hiking, camping, kayaking, social events, other

SECONDARY HOUSEHOLD MEMBER (optional for Family)

Must be at least 18. Use a different email for a separate sign-in, or leave it blank.

First name

Last name

Date of birth (MM/DD/YYYY)

Email (optional)

Phone (optional)

Please complete and sign page 2.

Your household, in good company.

OTHER HOUSEHOLD MEMBERS - Family Membership only

Include everyone else living at the same address, of any age. Their own online login is optional and can be approved later. Attach another sheet if you need more rows.

First name	Last name	Date of birth (optional)

☐ Everyone listed on this Family Membership lives at the address on page 1.

MEMBERSHIP AGREEMENT

Membership: Membership fees are non-refundable unless otherwise stated in writing.

Assumption of Risk: I acknowledge that participation in club activities involves inherent risks including but not limited to skiing, hiking, camping, and travel. I voluntarily assume all risks and agree to hold the Blue Ridge Ski & Outing Club, its officers, directors, and members harmless from any claims arising from my participation.

Code of Conduct: I agree to conduct myself in a manner that reflects positively on the organization and understand that membership may be terminated for inappropriate conduct.

Privacy: I consent to the club's use of my contact information for club-related communications and understand that my information will not be shared with third parties without consent.

Governing Law: This agreement is governed by the laws of the Commonwealth of Virginia.

Payment: For a paper application, make a check payable to BRSOC and mail both completed pages with payment to PO Box 3784, Martinsville, VA 24115. Or use the QR code to apply and pay online through PayPal. Membership becomes active after payment is received and processed.

☐ I have read, understood, and agree to abide by the membership agreement above.

Primary Household Member signature _____ Date _____

Secondary Household Member signature (if applicable) _____ Date _____