

Promoting Health, Fun and Fitness through Cross Country Skiing

Membership Form 2017-2018

DULUTH CROSS-COUNTRY SKI CLUB

Membership Level

| • | hip \$30 \$50 e it possible for DXC t | o offer events and programs for skiers of all ages a and advocate for cross-country skiing in Duluth. |
|--|--|--|
| Primary Member | | Volunteer |
| Name | | Please indicate how you can help. |
| Email address | | Mark all that apply. Thanks! |
| Street address | | ☐ Organizing/leading ski outings |
| City/State/Zip | | □ Trail Maintenance |
| Phone number | | □ Instruction |
| Family Members | | □ Race Support – Nordic Spirit |
| Name | | |
| Name | | Events (Banff Film Festival, Snow Ball gala, Tour DuLuth, Winter Trails Day, etc.) |
| Name Name | | Additional Support and Skills (marketing, IT, Social Media, Fundraising, etc.) |
| Name | | □ KidSki Coaching |
| If another family member would like to receive emails, please provide: | | |
| | address | Make checks payable to Duluth XC Ski Club 1346 W Arrowhead Rd PMB 344 Duluth, MN 55812-2218 |
| losses incurred by me or my family directl sessions or any other club-related activities | y or indirectly during my/our pages. I understand that cross cou | tatives and members from any and all claims or rights to damages for any injuries or articipation in any club sponsored events, races, clinics, trail work, ski or exercise untry skiing can be a potential dangerous activity. This waiver must be signed by ALL ne person or persons signing and minor members listed above. |
| Signed: | | Date: |
| Signed: | | Date: |