



APPLICATION FOR MEMBERSHIP

I, the undersigned, being over 18 years of age, hereby make application for membership in the Cleveland Hiking Club. I agree to abide by the Constitution and Rules of the Club.

Applicant Name (first, middle initial, last):		Gender:	Preferred Name (Opt) :
Address: Apt #		Emergency Contact Info (name, relationship, telephone):	
City, State Zip			
Primary Phone: <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work		Alternate Phone: <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work	
Email (please print clearly, <u>each person</u> must have a unique address for access to member-only pages on club website.):		Birthday: Month _____ Day _____	
		Occupation:	
For mailing purposes, if you have a seasonal address, please indicate the usual dates that you are away from your local address:		Schedules and our newsletter, <i>Newsteps</i> , are posted on the website: schedules on the public pages and <i>Newsteps</i> on the Member-only pages.	
___ I would like to be eligible for a 10% discount at Appalachian Outfitters at 60 Kendall Park Rd, Peninsula, OH info@appalachianoutfitters.com			
How did you hear about us? ___Website ___Friend/Relative ___CHC Member ___Saw Schedule in park ___Film Festival ___Library/Other			

Signature _____ Visitor ID: _____ (from invitation) Date _____

Please indicate Membership Level and Start Date: (Individuals residing within 75 miles of Cleveland, OH must apply for Active membership. Individuals who reside more than 75 miles from Cleveland, OH may apply for Associate or Active membership (Associate Members are entitled to all privileges of the Club but are not eligible to vote or to hold office.)

Where do you reside?	When do you want your membership to start?	
Within 75 mi of Cleveland, OH (Active):	Between Jan 1 & Aug 31	Between Sep 1 & Dec 31 ⁽³⁾
Single	___ \$50.00	___ \$35.00
Joint (2 individuals residing at same address)	Add ___ \$45.00 (Total \$95) ⁽¹⁾	Add ___ \$32.50 (Total \$67.50) ⁽¹⁾
More than 75 mi from Cleveland, OH (Associate):	Between Jan 1 & Aug 31	Between Sep 1 & Dec 31 ⁽³⁾
Single	___ \$45.00	___ \$32.50
Joint (2 individuals residing at same address)	Add ___ \$40.00 (Total \$85) ⁽¹⁾	Add ___ \$30.00 (Total \$62.50) ⁽¹⁾
One-time \$20.00 per person initiation fee applies and is <u>included</u> in the amounts above. Do not add.		

1. All individuals wishing to join must complete six CHC hikes within 12 consecutive months to qualify for membership and will receive individual invitations to join when eligible.
2. Initial payment with this application covers membership dues for remainder of current calendar year. Full calendar year dues apply in next and subsequent calendar years.
3. Memberships effective between September 1 and December 31 reflect 50% reduction in dues.

Please Note: All Memberships commence on Sundays. This application is valid for 12 months after original issue date. After expiration, you must complete a new series of 6 hikes within 12 months to be eligible for membership in CHC.

Application will not be processed until dues, fees and completed forms are received. Make check payable to Cleveland Hiking Club and mail to **Veronica Pavia, CHC Membership, 927 Arboretum Cir, Sagamore Hills, OH 44067**. Questions? 304-238-4032. chcmemberchair@gmail.com



LIABILITY RELEASE AND ASSUMPTION OF RISK

I, _____, residing at _____,
(PLEASE PRINT) FIRST NAME MI LAST NAME STREET ADDRESS

situated in the City of _____, County of _____

State of _____, acknowledge that there is an inherent risk of serious injury with not only hiking but also various recreational, social, volunteer, and other activities of the Cleveland Hiking Club, Inc. I knowingly assume the risk of these injuries. This includes bodily injuries, accidents, illness, death, loss of property, and economic losses.

I also agree to release, discharge and/or otherwise indemnify and hold harmless the Cleveland Hiking Club, Inc., its officers, committee chairpersons, hike leaders, major excursion leaders, members, and any affiliated organizations or sponsors, their employees and associated personnel from any and all claims by me or on my behalf for any injury resulting from my participation in or volunteering for any event or activity sponsored by or otherwise connected with the Cleveland Hiking Club, Inc. These volunteer activities may include aiding and using hand tools or power equipment in building, maintaining, and improving trails or facilities at Camp Onwego.

This liability release and agreement to assume the risk of injuries covers all Cleveland Hiking Club, Inc. meetings, volunteer work, activities, and events, including but not limited to those listed in the Schedule of Activities and NEWSTEPS or any Cleveland Hiking Club, Inc. publication.

DATE

SIGNATURE