

APPLICATION FOR MEMBERSHIP REINSTATEMENT

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.

Schedules and our newsletter, Newsteps, are posted on the website: schedules on the public pages and Newsteps on the Member-only page. I would like to be eligible for a 10% discount at Appalachian Outfitters at 60 Kendall Park Rd, Peninsula, OH info@appalachianoutfitters.cs Signature	Address: Emergency Contact Info (name, relationship, telephone): City, State Zip Alternate Phone:
City, State Zip Primary Phone: Cell Home Work	City, State Zip Primary Phone:
Primary Phone: Cell Home Work Alternate Phone: Cell Home Work Email (please print clearly, unique address required for access to member-only pages on club website.): Birthday: Month Day Occupation:	Primary Phone:
Email (please print clearly, unique address required for access to member-only pages on club website.): Birthday: Month Day Occupation:	
website.): Coccupation:	Email (please print clearly, unique address required for access to member-only pages on club Birthday: Month Day
Cocupation: Seasonal address (2): Yes No	
Usual seasonal date from: (mo/day)	,
Usual seasonal date from: (mo/day) their primary address, thereby avoiding the extra costs of return postage when mail cannot delivered as addressed. Requested Reinstatement Date:	
Requested Reinstatement Date: First Sunday after receipt of forms and fees Other date (please specifiy):	Usual seasonal date from: (mo/day) their primary address, thereby avoiding the extra costs of return postage when mail cannot
Approximate year joined CHC: Schedules and our newsletter, Newsteps, are posted on the website: schedules on the public pages and Newsteps on the Member-only page. I would like to be eligible for a 10% discount at Appalachian Outfitters at 60 Kendall Park Rd, Peninsula, OH info@appalachianoutfitters.c Signature Date	
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I would like to be eligible for a 10% discount at Appalachian Outfitters at 60 Kendall Park Rd, Peninsula, OH info@appalachianoutfitters.cs Signature Date	Approximate year joined CHC: Approximate year membership lapsed:
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 Meare entitled to all privileges of the Club but are not eligible to vote or to hold office.) Reside within 75 miles of Cleveland (Active) Active: Individual \$56.00 Associate: Individual \$51.00 Active: Joint Members \$97.00 Associate: Joint Members \$87.00	Schedules and our newsletter, Newsteps, are posted on the website: schedules on the public pages and Newsteps on the Member-only pages.
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Active Additional laint \$44.00 Accordate Additional laint \$20.00	
Active. Additional Joint \$41.00 Associate: Additional Joint \$35.00	Active: Additional Joint \$41.00 Associate: Additional Joint \$36.00

Amounts above include \$20.00 per person reinstatement fees and current year calendar dues.

Please Note: All memberships are reinstated on the first Sunday following receipt of completed forms and fees or on a later date if specified. Memberships renew every January. Mileage accumulated prior to membership lapse will be credited after verification.

Dues, Reinstatement Fee(s) and Liability Release(s) must accompany this application. Make check payable to The Cleveland Hiking Club and mail to Veronica (Roni) Pavia, CHC Membership Committee, 927 Arboretum Cir., Sagamore Hills, OH 44067. Questions? 304-238-4032, chcmemberchair@gmail.com

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LIABILITY RELEASE AND ASSUMPTION OF RISK

I,	, residir	ng at,
(PLEASE PRINT) FIRST NAME MI		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 bu
also various recreational, social, v	olunteer, and other ac	tivities of the Cleveland Hiking Club, Inc. I knowingly assume the
risk of these injuries. This includes	s bodily injuries, accide	ents, illness, death, loss of property, and economic losses.
I also agree to release, discharge	and/or otherwise inde	mnify and hold harmless the Cleveland Hiking Club, Inc., its officers,
committee chairpersons, hike lead	lers, major excursion l	eaders, members, and any affiliated organizations or sponsors, their
employees and associated persor	inel from any and all c	laims by me or on my behalf for any injury resulting from my
participation in or volunteering for	any event or activity s	ponsored by or otherwise connected with the Cleveland Hiking Club
Inc. These volunteer activities may	y include aiding and u	sing hand tools or power equipment in building, maintaining, and
improving trails or facilities at Carr	ıp Onwego.	
This liability release and agreeme	nt to assume the risk	of injuries covers all Cleveland Hiking Club, Inc. meetings, volunteer
work, activities, and events, includ	ling but not limited to t	hose listed in the Schedule of Activities and NEWSTEPS or any
Cleveland Hiking Club, Inc. public	ation.	
DATE		SIGNATURE