



# Membership Application

Application Date:

ACA#:

This Organization has been formed for club members to paddle the East Race Waterway in South Bend, Indiana. Access to this facility by club members will only be on dates not scheduled by the city as its normal season. There are specific guidelines that all members must acknowledge. These are outlined in the members agreement and must be obeyed to the letter.

Members must be a minimum of 18 years of age. Be a current member of the American Canoe Association (# required & Card). Acceptance to the club will be determined by members based on proficient whitewater skills. Helmet, Personal Flotation Device, Whistle and Rescue Throw bag will be required to use the East Race facility. Safety Issues will be enforced as outlined in the agreement submitted to City of South Bend. A fee will be required.

Name:

Address:

City:

State:

Zip:

Home Phone:

Work Phone:

Cellular/Other Phone:

email:

Birth Date:

in Case of Emergency Contact

## WAIVER

I recognize and fully understand that Whitewater boating can be a dangerous activity. There can be hidden obstacles in the water, tricky currents, sudden weather changes, and any number of hazards. In addition, mistakes can be made by fellow boaters. Despite the mutually supportive group structure, I am ultimately responsible for my own safety, and do assume sole responsibility for my decisions. In consideration for my membership in the East Race Whitewater Kayak Club and/or for the privilege of voluntary participation in its activities and events, I hereby waive and forever release any and all claims and/or demands against the East Race Whitewater Kayak Club, its members, or officers and the city of South Bend for personal injury to myself, including death, or to damage of personal property, and/or loss of services, arising from any damages or losses which I may suffer or incur while taking part in any activity or event of the club. This waiver and release shall be binding upon my heirs, executors, administrators, and assigns.

Sign Here to indicate that you have read and agree to the Waiver.

Dare:

Amount Paid: