

LIMESTONE BOAT & BOARD CLUB MEMBERSHIP FORM



Participants must have completed an appropriate LB&BC waiver form before participating in any Club event or activity.

Type of Membership (Includes HST):

R<sup>2</sup> Membership \$50.85

Individual Membership \$367.25

Family Membership \$621.50

\_\_\_\_\_  
Primary Member Name

Signed Waiver

Family Members:

\_\_\_\_\_

\_\_\_\_\_  
Age  Signed Waiver

\_\_\_\_\_

\_\_\_\_\_  
Age  Signed Waiver

\_\_\_\_\_

\_\_\_\_\_  
Age  Signed Waiver

\_\_\_\_\_

\_\_\_\_\_  
Age  Signed Waiver

Contact Information:

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

Email: \_\_\_\_\_

Age of participant:  19-25,  26-40,  41-55,  56-70,  70+

EMERGENCY CONTACT AND PHONE NUMBER:

\_\_\_\_\_

If you have any relevant medical conditions, please describe them below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Primary interest in activities (you can check more than one):

Recreational

Training/Fitness

Rowing

Competitive Activities

Safety/Skills

Personal/Family Activity

LIMESTONE BOAT & BOARD CLUB MEMBERSHIP FORM

As a participant and member of the Limestone Boat & Board Club, I fully understand, acknowledge and **INITIAL** to agree to the following:

- I am aware there may be inherent risks to me or my child participating in watersports and have signed the appropriate waiver for each member being registered
- I and my associated members agree to abide by the rules and regulations, policies and procedures of the Limestone Boat & Board Club and Royal Canadian Legion while entering or using the Legion facilities. This includes dress code if entering the Legion hall.
- I am aware of the recommendation that all participants have a competence level in swimming equivalent to the level of the Canadian Red Cross Swim Kids 6 which includes being able to swim 50 metres and tread water for five minutes.
- I am unaware of any health-related problems that I or my child may have that could cause injury while engaging in the activities of the Limestone Boat & Board Club.
- I have full knowledge of the nature and extent of the risks involving in participating in activities with the Limestone Boat & Board Club
- I am voluntarily assuming the risks involved in participating in the above-described program/activity and in doing so I fully understand that I will be solely responsible for any injury, loss or damage that I or my child causes or sustains.
- I am aware and understand the risks involved with paddling in cold water conditions. I understand that a Government approved PFD must be worn while participating in on-water activities during cold water conditions as outlined in the LBBC safety policies.
- I am aware and understand that the Royal Canadian Legion #631 and LBBC are not responsible for injury to myself or damage to my property while participating in activities while on the Royal Canadian Legion property.
- If my child listed on this form is a minor pursuant to the Age of Majority and Accountability Act, he/ she has my permission to participate in Limestone Boat and Board Club program/activity.

As the parent/legal guardian, my child and I fully understand and have full knowledge of the nature and extent of the risks involved with participating in the above-described program/activity. I and my child agree to indemnify and hold harmless the Limestone Boat and Board Club liable from all claims, demands, causes of action, loss, costs or damages that the Limestone Boat and Board Club may suffer, incur or be liable for in relation to any injury my child may suffer or cause to others in connection with my or my child's negligence or while I or my child is participating in the above-described program/activity. I and my child hereby release, waive, and discharge the Limestone Boat and Board Club from all liability to our heirs, executors, administrators, and assigns for all loss or damage and any claims or demands for such loss or damage on account of injury to person or property.

\_\_\_\_\_  
Primary Member Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Registered by: \_\_\_\_\_

Date: \_\_\_\_\_

Payment Received Date: \_\_\_\_\_

Method of Payment: \_\_\_\_\_