BLUE RIDGE

Membership Application

BLUE RIDGE	Membership Application	Membership Dues
	Blue Ridge Ski and Outing Club	October 1 to September 30
A STATE OF THE STA	P.O. Box 3784	
0100	Martinsville, VA 24115-2784	Family Membership - \$30.00
		Single Membership - \$18.00
	MEMBER	
		Life Membership
Address:		Males also asserble to UDD COO!
City, State, Zip: Phone: (H) (W)		Make checks payable to "BRSOC"
, ,		and mail to:
Cell:		Blue Ridge Ski and Outing Club P.O. Box 3784
	e (or omit) any info that you do not want	Martinsville, VA 24115-3784
included in the club directory.		Wartingvine, V/C 24110 0704
SPOUSE		INTERESTS
Name:	· · · · · · · · · · · · · · · · · · ·	
Address:		Snow Skiing Snowboarding
City, State, Z	lip:	Snow Blading Skating
Phone: (H) _	(W)	Biking Hiking
	-	Rafting Canoeing
e-mail:		Camping
CHILDREN - 18 and Under or 23 and Under if still in school		Other
	Birthdate:	
	Birthdate:	Forevite Chi Areas
	Birthdate:	Favorite Ski Areas
	Birthdate: Birthdate:	
Name:		
ivanic.	Membership Release Agreement	VOLUNTEER
monitorio nel reciono rigitorio nel		VOICHTIEN.
The Blue Ridge Ski and Outing Club (BRSOC) is a non profit organization run		
entirely by volunteer Officers and Board Members who have no special or professional training in conducting trips or other activities. The BRSOC provides a		
variety of activities for its members, many of which are, to varying degrees,		Your Chance to volunteer!!! You'll discover
hazardous. By signing this membership application, I voluntarily assume all risks		that the more you put into your Club, the more
involved and I, for myself, my heirs, executors, and assignees do hereby release		you'll get out of it. We are a member
and discharge the BRSOC, its Officers and Board Members from all claims for		operated, non profit organization to promote
any accident or injury to my person or property resulting from my participation in any Club activity. I understand that copies of the BRSOC Bylaws are available		group skiing and social events and sports activities. We depend on our members.
from the board members upon request. I agree to abide by all the Bylaws and		activities. We depend on our members.
standing policies of the BRSOC. Having read this consent and release of liability,		
I understand its	terms and enter into this membership.	
		☐ Check here if interested.
Member Signature:		
3		
Date:		
		Official use only
Spouse Sign	ature:	
		Check Number:
Date:		Date Received:
		Amount: