



Cincinnati Ski Club

APPLICATION FOR NEW MEMBERSHIP

Membership runs September 1 thru August 31

If the membership begins after June 1, membership will
continue until August 31 of the following year.

Membership Type: CHECK BOX FOR SELECTED TYPE

NEW MEMBERSHIP COST

(Refer to Bylaws Article II • Section for type definitions)

Annual Rate

<input type="checkbox"/> Single:	Individual (married or single) at least 21 years old.	\$30.00
<input type="checkbox"/> Single with	Individual member and immediate family sharing the	\$30.00
<input type="checkbox"/> Children:	same: residence. Family members must not have reached 21st birthday.	

☐ Enter total number of individuals included in new membership

How did you learn about the CSC? ☐ Member ☐ Facebook ☐ Meet-Up – Cincinnati Ski Club
☐ Web site ☐ Meet-Up – Cincinnati Social Club
☐ Non-member friend ☐ Other (be specific) _____

ADULT APPLICANT INFORMATION: Print

Gender: Birthdate:

Last Name: _____

First Name: _____

Street: _____ **Apartment:** _____

City: _____ **State:** _____ **Zip Code:** _____ - _____

Work Phone: (Area Code: _____) Number: _____ Extension: _____

Home Phone: (Area Code: _____) _____ **Cell Phone:** (Area Code: _____) _____

E-Mail: _____

Occupation: _____

SELECT DIRECTORY VISIBILITY OPTIONS - check one

- ☐ Show all information.
- ☐ Show all information EXCEPT email address.
- ☐ Show name, city, state, bio, email, phone and work info; No address.
- ☐ Show name, city, state, bio, email and phone; No address or work information.
- ☐ Show name, city, state, bio and email; No address, work information or phone.
- ☐ Show name, city, state, bio; No contact information.
- ☐ Show name, city, state; No bio or contact information.
- ☐ Do NOT list me in the online directory.

List me in the printed directory with the above restrictions. ☐ YES ☐ NO

Email me the free Sitzmark. ☐ YES ☐ NO

Please complete the information above and on reverse side of form.

CHILD INFORMATION (List additional children on a separate page and attach to form):**Print****Gender: Birthdate:****Lasst Name:** _____ - ____ - ____ - ____**First Name:** _____**Lasst Name:** _____ - ____ - ____ - ____**First Name:** _____**Lasst Name:** _____ - ____ - ____ - ____**First Name:** _____**Vounteer Commitment:**

The Cincinnati Ski club is a non-profit organization. Officers and trip leaders are volunteers. Without regular volunteer services from all members, the club cannot properly function. Each member is encouraged to commit (8) hours of volunteer help each year for the benefit of the Club. Please visit our website www.cinski.org for a list of activities in need of volunteers.

Club Communications

NOTICE: All club communications via e-mail use an address list that is protected and unavailable to anyone except the person responsible for issuing these communications. We follow all legal rulings with regard to this list. Your email address cannot be used for any other purpose or by any other person or group.

Email Notifications - CSC utilizes an email blaster to send important information regarding club issues, trips, events and activities. For example, if a last minute trip opening occurs we will issue an email informing members of this opportunity. Make your selection on page 1.

Sitzmark - The Sitzmark is the official club newsletter available at www.cinski.org/newsletter/. It will also be emailed to you monthly unless you opt out. Make your selection on page 1.

Do you want to receive the Sitzmark in printed form (for an additional charge of \$26)? ☐ YES ☐ NO

Release of Liability and Waiver Claims

I acknowledge that the Cincinnati Ski Club is a volunteer, non-profit organization with membership in the OVSC. In consideration for being permitted to join the Cincinnati Ski Club and participate in activities sponsored by this Club, the OVSC, and/or other OVSC affiliated clubs, I hereby for myself, my heirs, executors, and administrators unconditionally release and forever discharge the Cincinnati Ski Club, OVSC, and affiliated clubs, all of their officers, trustees, trip leaders, member agents acting on behalf of the organizations, and any person or business connected with or involved in producing the events, from all liability and hereby waive any claims, demands, or actions on account of my injury, death, or on account of damages which may occur to my property that I may now have or which may arise as a result of my participation in such activities, or in route to and/or from such activities.

I realize certain activities have inherent risks and hazards, and I recognize my responsibility to inspect all areas and satisfy myself as to the conditions surrounding any event as a precedent to my participation in that event.

I agree to allow the Cincinnati Ski Club to use my image or a photo of me in any publication.

I am twenty-one or older. I have read and fully understand this release of liability and waiver of claims. I am signing this release and waiver voluntarily.

Applicant _____ Printed _____
Signature _____ Name _____ Date: _____

Base membership cost (from front of this form)	\$	30.00
(optional) \$26 for receiving Sitzmark in printed form	\$	_____
TOTAL	\$	_____

Mail your check payable to Cincinnati Ski Club with this completed form to:

Robin Corr, CSC Membership Chairperson
966 Tivoli
Cincinnati, OH 45246

If you have questions, please call:

Robin Corr
(513) 520-7487
ricorr@yahoo.com

Thank You For Your Membership!