



2008-9 Copper Country Curling Club Adult Membership Application

Name _____
Address _____
City _____ Zip _____ Phone _____
Email _____

Membership Level		
Student	Any youth age 18 or younger, or full time Michigan Tech, or	<input type="checkbox"/> Free
1st Year	Any individual who has never curled with the Copper Country	<input type="checkbox"/> Free
2nd Year	Any non-Student who has curled for one season with the Copper	<input type="checkbox"/> \$50.00 per person
Veteran Member	Any non-Student who has curled two or more seasons with the Copper Country Curling Club.	<input type="checkbox"/> \$100.00 per person

US Curling Association, Great Lakes Curling Association, Insurance (**Everyone**) \$ 30.00

* Due no later than January 9, 2009

TOTAL DUE* \$ _____

Please indicate which League night(s) you plan to curl (check as many as you want)

- Tuesday Wednesday (Non-League, Pick-up)
 Thursday Saturday Afternoon (Veteran Members Only)

Scheduled Night League Dates: December 15-23, 2008, January 2-March 29, 2009, EXCEPT- January 24, 25, 30, 31, February 1, 20, 21, 22

Questions: Call Gordon Maclean 482-6788, or email president@coppercountrycurlingclub.com
Check our Web page www.coppercountrycurlingclub.com for more information and updates.

Please Read and Sign the Back of this Sheet (or Page2 if you got this online or via email) and send completed form with Payment to:

Gordon Maclean, 51540 N Superior Rd, Atlantic Mine, MI 49905

PARTICIPANT RELEASE

The undersigned hereby makes the following representations: (i) that the undersigned understands that the sport of curling is played on ice and requires physical fitness; (ii) that the undersigned possesses such physical fitness; and (iii) that the undersigned understands that the risks of participating in any curling activity could involve serious injury or death.

In consideration of being allowed access to the Ice House (as defined below) as a participant in any curling activity in the Ice House, I, the undersigned, for myself and my estate, successors, heirs, beneficiaries, administrators, trustees, representatives, and attorneys do hereby remise, release, acquit, and forever discharge (i) Copper Country Curling Club, a Michigan unincorporated organization (the "Club"); (ii) the United States Curling Association, Inc. ("USCA"); (iii) the Great Lakes Curling Association("GLCA"); (iv) the respective successors and assigns or each of the Club, USCA, and GLCA and (v) the respective employees, officers, and directors, but only while acting in their capacity as such, of each of the Club, USCA, and GLCA(collectively, the "Releasees") from any and all actions, causes of action, claims, demands, and liabilities, both in law and equity for damages and any court costs and legal expenses and fees associated therewith in respect of physical, mental, and bodily injury occurring to me while participating in any curling activity in the Ice House prior to the Expiration Date (as defined below); provided, however, that in the event such injury was caused, in whole or in part, by the wilful, intentional, reckless, or grossly negligent action or failure to take action of any Releasee, such Releasee shall not be so remised, released, acquitted, or discharged hereby; and provided, further, that nothing herein shall be deemed to limit or exclude any action, cause of action, claim, demand, liability, payment, reimbursement, other benefit, or any court costs or legal expenses and fees that I or my estate, successors, heirs, beneficiaries, administrators, trustees, representatives, or attorneys might have or seek against (a) the Club's "Participant Medical Accident" insurance coverage, (b) any other participant participating in any curling activity in the Ice House, or (c) against any other person or entity other than a Releasee.

The Ice House shall mean the single room containing 2 sheets of ice in which the sport of curling is played in the building located at The Drill House, Calumet Township, Michigan owned by Calumet Township and operated by Club. The Expiration Date shall mean the date which is one (1) calendar year after the date this Release is executed below.

I certify that I am at least eighteen (18) years of age and have the legal capacity to execute this Participant Release on my own behalf.

I hereby revoke any and all releases of liability, waivers, and indemnifications previously executed by me in favor of any of the Releasees.

BEFORE SIGNING BELOW, I WAS GIVEN THE OPPORTUNITY TO READ THIS PARTICIPANT RELEASE AND TO CONSULT WITH AN ATTORNEY AS TO ITS SIGNIFICANCE. BY SIGNING BELOW, I UNDERSTAND THAT I AM WAIVING SIGNIFICANT RIGHTS. I UNDERSTAND THE MEANING OF THIS PARTICIPANT RELEASE AND THE RIGHTS I AM WAIVING. NOTWITHSTANDING THE FOREGOING, I HAVE CHOSEN, OF MY OWN FREE WILL, TO EXECUTE THIS PARTICIPANT RELEASE.

Date: _____, 200__ Signed: _____

Name: _____
(please print)