



Capital Area Shag Club Application for Membership (Please Print)



Name _____
 Address _____
 City _____ State _____ Zip _____
 Home # _____ Work # _____
 Email _____
 Occupation _____
 Birthday _____ (month/day)

I would like to participate on the following committees:

_____ Holiday Parties	_____ Dance Floor	_____ Nominating Committee
_____ Social Committee	_____ Renewal Party	_____ Communications
_____	_____	_____ Other

MEMBERSHIPS DUES: \$20.00 per person/yr _____ **New member** _____ **Renewal** _____ **Charter**

MAKE CHECKS PAYABLE TO: CASC, mail to P. O. Box 19582, Raleigh, N.C. 27619

For Membership Director's Use

_____ Date	_____ Cash Amt	_____ Check Amt	_____ Check #
_____ Membership Card	_____ Entered On Membership List		

Release from Liability

This release is executed on the date below at Raleigh, Wake County, North Carolina, by the above named, herein referred to as "releasor(s)".

In consideration of being admitted to participate in any activities conducted by Capital Area Shag Club, releasor for himself, his spouse, legal representatives, heirs and assigns, hereby releases, waives, and discharges Capital Area shag Club, its officers, and members (herein referred to as "releasee"), and each of them from all liability to releasor, releasor's spouse, legal representatives, heirs, and assigns, from any and all loss or damage and any claims or damages resulting there from, on account of injury to releasor's person or property, even injury resulting in death of the releasor, whether caused by negligence of releasees or otherwise, while the releasor is for any purpose participating in any activity or function sponsored by Capital Area Shag Club throughout the club year.

Releasor agrees to indemnify the releasees and each of them from any loss or liability, damage, or cost they may incur due to the presence of the releasor at any activity or function sponsored by Capital Area Shag Club, whether caused by the negligence of the releasee or otherwise during the club year.

Releasor hereby assumes full responsibility for the risk of bodily injury, death, or property damage due to the negligence of the releasee or otherwise while for any purpose participating in any activity or function sponsored by Capital Area Shag Club during the club year.

Releasor expressly agrees that this release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the state of North Carolina and that if any portion hereof is held invalid, it is agreed that the balance shall notwithstanding continue in full legal force and effect.

I acknowledge that I have read the above Release from Liability statement.

_____ Date _____
 _____ Date _____

