



AMERICAN CANOE ASSOCIATION MEMBERSHIP FORM



All minor participants in ACA-insured activities must be ACA members in one of the following categories (choose one):

I am currently an ACA member. My member number appears below. (Check here if renewing with this form <input type="checkbox"/>)	<input type="checkbox"/>	I would like a one-year Student Membership for \$25 (Under 18, or under 23 with copy of student ID)	<input type="checkbox"/>
I would like an ACA Introductory Membership for \$15 (Six month full membership with benefits, including Paddler Magazine)	<input type="checkbox"/>	I would like an ACA Event Membership for \$5 (One activity membership, no member benefits)	<input type="checkbox"/>

AMERICAN CANOE ASSOCIATION MINOR WAIVER & RELEASE OF LIABILITY READ BEFORE SIGNING

IN CONSIDERATION of being permitted to participate in any way in the American Canoe Association, Inc. sports and recreation program and related activities ("Activities") I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of Paddlesports and related Activities and that I am qualified, in good health, in proper physical condition to participate in such Activity and willingly agree to comply with the stated and customary terms and conditions of participation. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. If I decide to leave early and not complete the trip as planned, I assume all risks inherent in my decision to leave.

2. FULLY UNDERSTAND that: (a) Paddlesports and related ACTIVITIES INVOLVE RISKS AND DANGERS OF DAMAGE TO PERSONAL PROPERTY AND SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE American Canoe Association, Inc., its Paddle America Clubs, affiliated clubs and organizational affiliates, their respective ACA certified instructors, certified instructor trainers, and certified instructor trainer educators, administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, DAMAGE TO PROPERTY, OR OTHER DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

MINOR PARTICIPANT: I, THE MINOR PARTICIPANT, HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Minor Name (print) _____ Minor Date of Birth _____ ACA # (if any) _____

Minor Street Address _____ Minor Phone _____

Minor City _____ Minor State _____ Minor Zip _____ Minor Email _____

Date _____ Minor Signature _____

PARENT OR GUARDIAN: I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF PADDLESPTS AND RELATED ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

Parent/Guardian Name (print) _____ Parent/Guardian ACA # (if any) _____

P/G Street Address _____ P/G Phone _____

P/G City _____ P/G State _____ P/G Zip _____ P/G Email _____

Date _____ Parent / Guardian Signature _____

Activity Description _____ Sponsoring Org. _____ Activity Date _____

WAUSAU KAYAK / CANOE CORPORATION

WAIVER, INDEMNIFICATION AND RELEASE OF LIABILITY

(Initial Below) Participant/ Parent/Guardian In consideration of the opportunity to participate and/or my participation in any way in Wausau Kayak & Canoe Corporation program, and related events and activities, the undersigned, for him/herself, his/her personal representatives, heirs, next of kin:

_____/_____
Initial

1. Agrees that prior to participating, he/she will inspect the facilities and equipment to be used, and if he/she believes anything is unsafe, he/she will immediately advise his/her coach or supervisor of such condition(s) and refuse to participate.

_____/_____
Initial

2. Acknowledges and fully understands that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses to person or property which might result not only from his/her own actions, inactions or negligence, but also the actions, inactions or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.

_____/_____
Initial

3. Assumes all the foregoing risks and accepts personal responsibility for any and all loss, liability, damages or costs following such injury, permanent disability or death.

_____/_____
Initial

4. I, for myself and my heirs, assigns, executors, and administrators release, waive, discharge, and covenant not to sue Wausau Kayak & Canoe Corporation, its respective administrators, directors, agents, coaches, instructors, assistants, volunteers, and other employees or agents of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event, all of which are hereinafter referred to as "Releasee," from any and all claims, liability, demands, losses, or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or part by the negligence of the Releasee or otherwise.

_____/_____
Initial

5. I agree to indemnify and save and hold harmless the Releasees from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in any way competing, officiating, observing, or working for, or for any purpose participating in the event, activity, or training.

_____/_____
Initial

6. I give permission for Wausau Kayak / Canoe Corporation to use photographs or video images of individuals, including myself engaged in Whitewater activities or as a volunteer supporting Whitewater activities, for promotion of Wausau Kayak / Canoe Corporation's activities or events. I understand that I will receive no payment for these images, now or in the future.

THE UNDERSIGNED HAS READ THE ABOVE WAIVER, INDEMNIFICATION AND RELEASE, UNDERSTANDS THAT HE/SHE HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGNS IT VOLUNTARILY.

Date: _____

Participant Printed Name: _____

Participant Signature: _____

Address: _____

City: _____ State: _____ Zip: _____

Club/Organization _____

:

Parent or Guardian Printed Name (if participant is a minor)

Parent or Guardian Signature: (for minor participant)

Address: _____

City: _____ State _____ Zip: _____