



Little Campbell Watershed Society

c/o Brooksdale Environmental Centre
1620 192nd Street, Surrey BC V3Z 9V2
www.littlecampbellriver.org

Membership Application and Waiver

First Name: _____ Last Name: _____

Address: _____ City: _____

Province: _____ Postal Code: _____ Email Address: _____

Phone: _____ Special Interests: _____

Annual Fees:

Individual Membership \$35.00: _____ **Family Membership \$35.00** (same household): _____

- Membership includes membership to BC Nature and liability insurance (while participating in LCWS projects and events), and their quarterly e-magazine. For printed copy of quarterly magazine: additional \$5.00 Yes / No
- All members receive our LCWS monthly e-newsletter

Waiver

This document affects your legal rights – please read it carefully

Signature of this agreement is a condition of participation in the activities of the society. By signing this agreement you will waive certain legal rights, including the right to make a claim for damages with respect to activities. You will absolve the Little Campbell Watershed Society and its representatives from liability.

Assumption of Risk

I am aware that certain activities of the Society involve risks and may result in personal injury, death, property damage, expenses or related loss, including loss of income. These risks include negligence on the part of the society, the directors, officers, members, employees, and volunteers who organize and lead activities, described herein as “the society and its representatives”. I freely accept and fully assume all such risks and the possibility of personal injury, death, property damage, expenses and related loss, including loss of income, resulting from my participation in such activities.

Release of Liability and Waiver of Claims

I agree as follows:

_____ To waive any and all claims that I, or any heirs, may have in the future against the Society and its representatives with respect to any activity.

_____ To release the Society and its representatives from any and all liability for any personal injury, death, property damage, expenses and related loss, including loss of income, which I may suffer as a result of my participation, due to any cause whatsoever, including negligence, breach of contract or breach of any statutory duty of care.

I have read this agreement and I understand it:

Your Signature

Date:

Membership Form: Print and fill out, and add your handwritten signature. You can take a picture of the signed form and e-mail to: info@littlecampbellriver.org Or you can mail the hard copy to the above address.

Membership Fee: \$35.00 (plus \$5.00 if you choose to receive the printed copy of the quarterly BC Nature magazine). Send a cheque payable to Little Campbell Watershed Society to the address above Or e-transfer to info@littlecampbellriver.org