Sault Naturalists Membership Form			
<u>Mail to</u> : Sault Naturalists Attn: Membership Committee P.O. Box 20040, EAST END PO, Sault Ste. Marie, ON P6A 6W3 <u>Email to</u> : saultnaturalists@gmail.com			
Categories and Fees*:	E-transfer O	Cash	Cheque O
Renewal	Student \$10		Individual \$25
New Member	Family \$30		Life \$250
*You may submit payment in either US or Canadian funds. For e-transfer, add saultnaturalists@gmail.com to your list of payees and forward the payment. Please put your name in the text field. *Please remember us in your estate planning*			
Name/ Names of Family Members:			
Address:		City:	Prov/State:
Postal/Zip Code:	Country:		Telephone:
E-mail address:			

Please read CAREFULLY and SIGN below, for yourself and any minors in your care, to indicate that you have READ and UNDERSTOOD the following:

- I understand that during my participation in SAULT NATURALISTS CLUB ACTIVITIES, I may be exposed to a variety of HAZARDS and RISKS.
- I acknowledge and voluntarily accept that my PARTICIPATION in CLUB ACTIVITIES could result in INJURY or DEATH to myself, or any MINORS in my care, and DAMAGE to my PROPERTY.
- I agree to WAIVE, DISCHARGE CLAIMS, and RELEASE FROM LIABILITY, the SAULT NATURALISTSCLUB, ITS OFFICERS, MEMBERS, AND ACTIVITY LEADERS.
- I understand and intend that this ASSUMPTION OF RISK AND WAIVER AGREEMENT is binding upon my HEIRS, EXECUTORS, ADMINISTRATORS AND ASSIGNS, and includes any MINORS accompanying me.
- I confirm that I have READ THIS DOCUMENT in its ENTIRETY and I APPRECIATE, UNDERSTAND, and FREELY ACCEPT all risks on my own behalf, and on behalf of any MINORS participating in club activities with me.

<u>Type name here</u> (by typing my name on this form, I agree to the stipulations of the waiver as if it were signed by hand):