MEMBERSHIP RENEWAL FORM

ALTAIR SKI & SPORTS CLUB

P.O. Box 70528, Springfield, Oregon 97475

Membership requirement: Applicant **must be at least 21 years of age**

DUES: _____$70.00 Membership Renewal, if received or postmarked no later than **November 1**

_____$75.00 Membership Renewal, if received or postmarked after **November 1**
(if membership has lapsed over 30 days, an Application for Membership must be completed)

Membership Number: _______& __________ Date of Birth : ______/______/______
(first 2 letters of last name & last 4 digits of soc sec #) **(Year not published)**
Secure – Not published anywhere

Please complete your name and current contact information. The following information will be entered into the secure Altair data base and will appear in the membership directory.

Name ____ Female ______ Male______
First Name Middle Initial Last Name

Address____
Street City State Zip

Email address: ______________________________________

Home phone: ______________________________________

Work phone: ______________________________________

Cell phone: ______________________________________

Please mail this form along with your check or money order (payable to ALTAIR) to ALTAIR, PO Box 70528, Springfield, OR 97475.

The undersigned hereby applies for membership in Altair Ski & Sports Club (the Club) for the November 1 through October 31 fiscal year and agrees to be bound by all Club bylaws, rules, policies, and procedures. I hereby release the Club and any of its agents (officers, directors, event leaders, and any other Club representatives) from any liability for personal injury, property damage, or any other liability of any kind connected with my attendance at any Altair Ski & Sports Club event (meeting, party, trip, activity, or gathering of any kind). I further grant the Club the right to photograph and use my appearance in connection with group functions in promotional materials without reservation or limitations.
Furthermore, I agree to indemnify and hold the Club and any of its agents harmless from any and all liabilities of any kind which may be incurred or asserted against the Club or any of its agents in any way relating to my negligence or willful misconduct connected with my attendance at any Altair Ski & Sports Club event.

Signature____ **Date _____/_____/____**

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FOR CLUB USE ONLY

AMOUNT PAID Check $ __________ Check #___________ _____ Altair Membership Card

Credit Card $___________ _____ FWSA Membership Card

Gift Certificate: $___________ Certificate #___________ _____ Added to Database

Received by____ Date___________________

WHITE COPY—DATA BASE revised 10/01/20