

**Prescott Camera Club  
2019 Membership and Waiver Form**

**Membership Information**

*All memberships for 2019 are in effect from 1/01/19 to 12/31/19. Dues are \$25 for an individual and \$35 for a couple. Make your check payable to: 'Prescott Camera Club' and bring it to a meeting with this signed form or mail them to: Prescott Camera Club Treasurer, 306 Double D Dr., Prescott, AZ 86303.*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email address: \_\_\_\_\_

**Waiver**

This waiver is in effect from 1/01/19 to 12/31/19

I acknowledge and accept that by participating in any Prescott Camera Club (hereafter known as PCC) meeting(s) and/or event(s), I may be exposed to certain known and unknown risks, dangers, hazards and liabilities. I affirm that I am in good health and capable of performing whatever physical exercise or activity that is required of me. I freely accept and fully assume any legal responsibility for any personal injury, death, losses, inconvenience or property damage that may arise from such risks, dangers and hazards as a result of my participation in these Events. I, on behalf of myself, my heirs, executors, administrators and assigns, hereby release, indemnify and hold harmless PCC< its volunteers, founders, leaders and board members and each of their heirs, executors, administrators and assigns from any claim, case of action, cost, expenses or demands and all liability whatsoever arising or that may arise as a result of my participation in these Events. ***This waiver and release shall be binding on heirs, my executors, administrators, assigns and me. By signing below, I confirm that I have read, understood and accepted the above conditions.***

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name (please print): \_\_\_\_\_

Signature of Parent or Guardian ***if the participant is under age 18:***

\_\_\_\_\_

Name of Parent or Guardian (please print): \_\_\_\_\_