

# BANDON PHOTOGRAPHY CLUB

## Membership Application

Date: \_\_\_\_\_ New Member \_\_\_ Reactivate \_\_\_ Annual Dues: \$50 Ind \_\_\_\$75 Family\_\_\_ (June – July)

Name(s) \_\_\_\_\_

Street \_\_\_\_\_ Apt \_\_\_\_\_

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

Email \_\_\_\_\_ Phones: Home \_\_\_\_\_ Cell \_\_\_\_\_

Photographic experience level: Beginner \_\_\_ Intermediate \_\_\_ Advanced \_\_\_ Professional \_\_\_

Equipment used: \_\_\_\_\_

### Your photographic interests?

Black & White \_\_\_ Creative Digital \_\_\_ Nature \_\_\_ Landscapes \_\_\_ Portraits \_\_\_ Micro/Macro \_\_\_

Special Effects \_\_\_ Sports/Action \_\_\_ Wildlife/Birds \_\_\_ Events \_\_\_ Astrophotography \_\_\_

Other \_\_\_\_\_

Would you be willing to help with Club Activities: Yes \_\_\_ No \_\_\_ If yes, in what manner?

Competition \_\_\_ Field Trips \_\_\_ Programs \_\_\_ Publications \_\_\_ Education \_\_\_ Finance \_\_\_ Membership \_\_\_ Outreach \_\_\_

Other: \_\_\_\_\_

Previous Camera Club experience? Yes \_\_\_ No \_\_\_ Office Held \_\_\_\_\_

How did you hear about our Club? Member \_\_\_ Google \_\_\_ Facebook \_\_\_ Website \_\_\_ other \_\_\_

Comment on what you hope to gain from your membership in the Bandon Photography Club:

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# Assumption of Risk, Waiver of Liability and Indemnification

For and in consideration of having the right to be a member of the Bandon Photography Club and/or to use any premises where Club meetings or activities are held and/or to participate in any and all Club activities, the undersigned acknowledges and agrees to the following:

**Assumption of Risk:** I recognize and understand that activities with the Club may, in some situations, involve inherently dangerous activities and I also acknowledge that medical facilities may not be available in the event I become ill or injured. I hereby expressly and specifically assume the risk of injury or harm and release the Club and its officers, directors, and other members from all liability for injury, illness, death, or property damage resulting from the activities involving the Club.

**Waiver and Release:** I release and forever discharge and hold harmless the Club and its officers, directors, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct Club activities ("Releasees"), and their successors and assigns from any and all liability, claims, and demands of whatever kind or nature EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, which arise or may hereafter arise from my participation in any activities of the Club. I agree that the waivers, releases and indemnities in this document shall apply to, and Releasees shall not be liable for, any loss, damage or theft of my personal property or photography equipment, or any failure to provide supervision, instruction, training, or security in conjunction with any Club activities.

**Medical Treatment:** I hereby release and forever discharge the Releasees from any claim whatsoever that arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my activity with the Club. I also understand that the Club does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance, in the event of injury, illness, death, or property damage.

**Indemnity:** I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in Club activities, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

**Comprehension and Appreciation:** I have carefully read this Assumption of Risk, Waiver of Liability and Indemnification and I fully understand its contents. I am aware that this is a binding legal document and that it affects my legal rights. I also understand that by releasing the Releasees from liability, I am giving up certain rights that I would otherwise retain. I acknowledge that I have had the opportunity to review this document and to seek legal advice if I have any questions, **and I verify this statement by placing my initials here:** \_\_\_\_\_

**Intent of Document:** I expressly agree that this document is intended to be as broad and inclusive as permitted by the laws of the State of Oregon and that this document shall be governed by and interpreted in accordance with the laws of the State of Oregon.

**Severability:** I agree that in the event that any clause, sentence, or provision of this document shall be held to be invalid by any court of competent jurisdiction, the validity of that clause or provision shall not otherwise affect the remaining provisions of this document which shall continue to be enforceable. This document is binding upon me and my heirs, personal representatives, and assigns, and any other person making a claim on my behalf. In addition, if I am a married person, I agree that this document is made by me on my behalf and on behalf of the marital community of my spouse and me, and I agree that this document will be binding on that marital community.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date