



Aurora Nordic Ski Club Membership Form

Name: _____

Address: _____

Town: _____

Postal Code: _____ Telephone: _____

Fax: _____ Email: _____

List of Members	Pass #	Group	Fee

Total Paid:

Declaration: I hereby agree to abide by the rules and regulations of the Aurora Nordic Ski Club and to participate in events, activities and games sanctioned by Cross Country Canada in accordance with the association's rules, regulations and by-laws. In consideration of Cross Country Canada association's events, activities and games, I hereby, for myself, my heirs, executors, administrators and assigns, forever release, discharge and hold harmless Cross Country Canada and the Aurora Nordic Ski Club, its directors, officers, employees, representatives or agents.

Signature of Member: _____ Date: _____

Parent/Guardian Signature*: _____

*All Participants under the age of 18 must have the parent or guardian sign above.