

WILLIAMS LAKE FIELD NATURALISTS CLUB MEMBERSHIP FORM

NOTE: To participate in any club field activity or work party the Assumption of Risk **MUST be signed for each adult and child (under 19 years) as a condition of membership, and consent given to allow for member insurance coverage.** Please sign BOTH SIDES of this form plus the additional dedicated form for children and additional adult family members, as necessary.

PERSONAL INFORMATION and CONSENT FOR INTERNAL USE OF IT

Full Names: _____

PRINT First name(s) followed by last name(s)

*Note: Additional adults in family beyond first two **plus all children** must also have the "INFORMED CONSENT and ASSUMPTION OF RISK For Children Under 19 Years Of Age Or Additional Adult Family Members" form submitted.*

Mailing Address

City

Province

Postal Code

Home Phone: _____ E-mail Address: _____

This information will be used by the Williams Lake Field Naturalists (WLFN) and BC Nature for member insurance coverage (necessary for you to participate in field trips and events) and to send newsletters and e-mail updates (if applicable). It will not be distributed or sold to anyone else. Images of you at Club events may be used in articles and on the Williams Lake Field Naturalists, Scout Island Nature Centre, or BC Nature websites. By filling in this section, you consent to this use.

If you do not consent to this use, check this box (you will therefore not be able to participate in field trips/events or receive communications from WLFN) : Date: _____

MEMBER INFORMATION

Single Membership \$30.00

Family Membership \$35.00

Student Membership \$10.00

Birth date if "Student" under 19 years _____

Club fees include membership with BC Nature.

Please complete and return to the Williams Lake Field Naturalists- membership, 1305A Borland Road, Williams Lake, B.C. V2G 5K5.

COMMUNICATIONS

WLFN "Muskrat Express" (check one): Newsletter via e-mail or Newsletter via postal service

From BC Nature (check any): "BC Nature" magazine Monthly "E-news" via e-mail (different from magazine)

Do you want a paper receipt for this membership (such receipts are not useable for income tax purposes)? YES NO

ACCEPTANCE OF TERMS AND CONDITIONS

In consideration of the acceptance of my membership in the Williams Lake Field Naturalists Club (or my child/ward's), I, the participant (and/or parent/guardian on behalf of a "Student" member under age 19), agree as follows:

1. To abide by the policies, rules and regulations of the Williams Lake Field Naturalists Club.
2. I have reviewed the Assumption of Risk agreement and my signature affixed hereto indicates my agreement with such Assumption of Risk agreement.
3. I accept sole responsibility for my (or my child/ward's) personal possessions and equipment (if applicable).

I acknowledge that I have read this form in its entirety and that I have executed this membership agreement voluntarily.

1 Signature of 1st Adult Participant _____ Date _____

2 Signature of 2nd Adult Participant _____ Date _____

Signature of Parent/Guardian (If this is "Student" Membership and member is under 19) _____ Date _____

**WILLIAMS LAKE FIELD NATURALISTS CLUB
INFORMED CONSENT AND ASSUMPTION OF RISK AGREEMENT**

WARNING!

By signing this document you will waive certain legal rights. Please read carefully.

DISCLAIMER

This is a binding legal agreement. As a Participant in the programs, activities and events of the Williams Lake Field Naturalists Club and the Federation of BC Naturalists, the undersigned acknowledges and agrees to the following terms:

The Williams Lake Field Naturalists Club and the Federation of BC Naturalists and their respective directors, officers, committee members, members, employees, volunteers, participants, agents and representatives (collectively the "Organization") are not responsible for any injury, personal injury, damage, property damage, expense, loss of income or loss of any kind suffered by a Participant during, or as a result of, any program, activity or event of the Organization, caused by the risks, dangers and hazards associated with the programs, activities and events of the Organization.

DESCRIPTION OF RISKS

I am participating voluntarily in these activities, events and programs of the Organization. In consideration of my participation in the programs, activities and events of the Organization, I hereby acknowledge that I am aware of the risks, dangers and hazards associated with or related to any such programs, activities and events of the Organization and may be exposed to such risks, dangers and hazards. The risks, dangers and hazards include, but are not limited to, injuries from:

- a) Field trips and outings;
- b) Nature walks;
- c) Bird counts and watching;
- d) Road cleanup;
- e) Animal attacks, including but not limited to, bears, cougars and snakes;
- f) Extreme weather conditions which may result in heatstroke, sunstroke, hypothermia, frostbite, or lightning strikes;
- g) Inhalation of viruses or infections including but not limited to, Hantavirus Pulmonary Syndrome;
- h) Executing strenuous and demanding physical techniques including climbing and hiking;
- i) Vigorous physical exertion;
- j) Grass, turf and other surfaces including bacterial infections and rashes;
- k) Falling to the ground due to uneven, slippery, steep, rocky or irregular terrain or surfaces;
- l) Failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment;
- m) Spinal cord injuries which may render me permanently paralyzed; and
- n) Travel to and from activities, events and programs.

1. Furthermore, I am aware:

- a) That injuries sustained can be severe;
- b) That I may experience anxiety while challenging myself during the activities, events and programs;
- c) That my risk of injury is reduced if I follow all rules established for participation; and
- d) That my risk of injury increases as I become fatigued

RELEASE OF LIABILITY

2. In consideration of the Organization allowing me to participate, I agree:

- a) That I do not know of any medical condition I might have that could make it unwise from me to participate in the Club's activities, events or programs, including but not limited to heart conditions;
- b) To freely accept and fully assume all such risks, dangers and hazards and possibility of personal injury, death, property damage, expense and related loss, including loss of income, resulting from my participation in such activities, events and programs;
- c) To forever release the Organization from any and all liability for any and all claims, demands, actions and costs that might arise out of my participation in the activities, events and programs of the Organization.

ACKNOWLEDGMENT

3. I acknowledge that I have read this agreement and understand it, that I have executed this agreement voluntarily, and that this agreement is to be binding upon myself, my heirs, executors, administrators and representatives.

1 _____
 Printed Name of 1ST Participant **Signature** of Participant Date

2 _____
 Printed Name of 2nd Participant **Signature** of Participant (or parent of "Student" under 19) Date

Note: Additional adults in family beyond first two plus all children must also have the "INFORMED CONSENT and ASSUMPTION OF RISK For Children Under 19 Years Of Age Or Additional Adult Family Members" form submitted.