

**WCP Membership Form: Year \_\_\_\_\_**

Memberships run from January 1 to December 31 of each year.

Please read, sign and return this form with your membership dues of \$10 per family, per year to:

Western Carolina Paddlers  
P.O. Box 8541  
Asheville, NC 28814

Release of Liability and Acknowledgment of Responsibility:

In consideration of the benefits of being a member of the Western Carolina Paddlers (WCP) canoe and kayak club, I on behalf of myself, my heirs and assignees, hereby release the Western Carolina Paddlers club, its officers, employees and common adventure coordinators, from all liability from claims for property damage, bodily injury, or death arising from any club associated activity or trip.

I hereby acknowledge that whitewater, flatwater, kayak, canoe or raft paddling is an inherently hazardous activity, which may result in injury or death of its participants. I acknowledge that it is my decision whether to participate in any activity or trip, or any given portion of any activity or trip, including running any given river, or sections of, on any given day, and that I must rely on my own knowledge of my abilities and my own assessment of the river conditions to make any such decision.

Signatures: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Names: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

Phone: (H) \_\_\_\_\_ (W: name) \_\_\_\_\_  
(C) \_\_\_\_\_ (W: name) \_\_\_\_\_

E-mail address(es): \_\_\_\_\_  
\_\_\_\_\_

Boat(s) paddled: \_\_\_\_\_

Amount paid: \_\_\_\_\_ Date: \_\_\_\_\_  
( \$10 per year per family, including families of one. Prorate if new member: \$5 after June 1<sup>st</sup>).