



New Membership and Membership Renewal

Name _____ Birthdate _____ Age _____
 Address _____
 City _____ State _____ Zip _____
 Phone () _____ Cell Phone () _____
 Home Email _____ Work Email _____

Please put a check mark to the right (in box provided) of the information you would like included in the LAWSC on-line roster. The roster is password protected and only viewable by other club members.

Family Members

Spouse _____ Birthdate _____ Age _____
 Child _____ Birthdate _____ Age _____
 Child _____ Birthdate _____ Age _____
 Child _____ Birthdate _____ Age _____
 Child _____ Birthdate _____ Age _____

Yearly Membership Dues

- \$20.00 Single Membership
- \$30.00 Family Membership (Includes all children under 18 years of age.)
- \$30.00 First Year Single or Family Initiation Fee

New membership status is for a period of one year. After the first year of membership, you will be entitled to sponsor new members.

In consideration of the Lake Aldred Water Ski Club, Inc. accepting this application, I hereby for myself, my heirs, executors, and administrators, and/or for the minor for who I am signed, release and forever discharge the Lake Aldred Water Ski Club, Inc. and members of the said club, of and from any and all rights, claims, demands and actions whatsoever that I may have for any and all loss, damage or injury to me, or by the minor for who I am signing for, any and all loss, damage or injury to him/her while using the Lake Aldred Water Ski Club, Inc's. equipment including the ski jump and the slalom course. I also understand that drug and alcohol abuse will not be tolerated.

Signature _____ Date _____
 Spouse _____ Sponsor _____
 Parent/Guardian if applicant is under age 18 _____

Mail completed form and payment to
1 Deep Pond Court, New Freedom, PA 17349