



# 2023 Hackensack River Canoe & Kayak Club Membership Application & Participant Release of Liability Waiver

In consideration of being allowed to participate in any way in this sports activity, related events and activities, the undersigned acknowledges, appreciates, and agrees that: The risk of injury or illness from the activities involved in this sport is significant, including the potential for permanent paralysis and death; and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury or illness does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation.

If I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such hazard to the attention of the nearest official immediately; and, I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS **PADDLESPORT RISK MANAGEMENT, LLC; HACKENSACK RIVER CANOE AND KAYAK CLUB; CENTRAL UNITARIAN CHURCH;** their officers & directors, officials, agents, and/or employees, other participants, sponsoring agencies, commissions, sponsors, advertisers, volunteers, coaches, steerers, and, if applicable, owners and lessors of premises used to conduct club activities or special events (“RELEASEES”), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I also acknowledge that photographs and video may be taken of me in my participation in, and attendance at this event, and hereby freely agree to allow without restriction all uses of such photos and videos in the reporting of this club activity or race, and/or in the promotion of the club, its location, other sporting events, sport in general, and/or related purposes.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

This form can be completed online via the links on the “membership application & guest waiver” page on [www.hrckc.org](http://www.hrckc.org)

**Paper forms and checks should be mailed to HRCKC, c/o Peter Walker, 24 Northview Ter, Cedar Grove, NJ, 07009**

*Paper forms and checks may take several weeks to process*

### COMPLETE ALL SECTIONS - PLEASE PRINT LEGIBLY

If you have questions or need assistance, email [info@hrckc.org](mailto:info@hrckc.org)

<p><b>Each adult in a family membership should complete this form</b></p> <p>I am applying for/renewing membership as a(n):</p> <p><input type="checkbox"/> Individual Member (\$15)</p> <p><input type="checkbox"/> Family - 1st Adult (Family Membership is \$25 and covers 2 adults in same household)</p> <p><input type="checkbox"/> Family - 2nd Adult (in a Family Membership)</p> <p><input type="checkbox"/> Life (founding) Member</p>	<p><b>Payment (Individual and Family 1<sup>st</sup> Adult only)</b></p> <p><input type="checkbox"/> I have paid or will pay by credit/debit card or PayPal via the “Dues Payment” link on the “membership application &amp; guest waiver” page on <a href="http://www.hrckc.org">www.hrckc.org</a></p> <p><input type="checkbox"/> I have sent or will send a check to HRCKC</p> <p><input type="checkbox"/> Other _____</p>
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Name: \_\_\_\_\_

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

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

Cell Phone: \_\_\_\_\_ Home/Office Phone: \_\_\_\_\_

I am over the age of 18    Signature: \_\_\_\_\_    Date: \_\_\_\_\_

Contact information is published on the members only section of our website to enable trip coordinators to confirm that participants are members in good standing, and to contact them in the event of any changes.

Check here if you do NOT want your contact information included