



Hackensack River Canoe & Kayak Club, Inc. 2020 Membership Application

c/o Jim McLoone
37 Westview Drive
Bergenfield, NJ 07621-3348
info@hrckc.org HRCKC.org

(Please print clearly; otherwise your membership may not be processed properly)

Join by 10/31 for membership through end of February. Join after 10/31 for membership through end of following February

Individual Membership (\$15) Ignore the second waiver.	Family Membership (\$25) Complete one waiver for each adult.
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Check <input type="checkbox"/> if you wish to pay via cash or check at a club meeting.	Check <input type="checkbox"/> if you wish to pay via check using USMAIL sent to the address above.	Click <input type="checkbox"/> if you wish to pay via your PayPal account.
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Primary Adult	Full Name	Email
2 nd Adult if any	Full Name	Email

Information from the insurance waiver shall be considered part of this application.

Check here if you do **NOT** want your contact information listed in the on-line membership directory.

Note: Members must be at least 18 years of age.

(Minor children may participate in club activities with the agreement of the Trip Coordinator and if accompanied at all times by at least one of their parents or guardians or an adult member authorized by their parents or guardian to act in their place. Minor and parent or guardian must sign waiver before participating.)

Guests may attend one on the water activity before joining. They must sign waivers and follow club rules for trip participants at <http://hrckc.org/docs/00-pubiicmenu.htm>.

Release of Liability

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 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 does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, even if arising from negligence of 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, however, 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 & 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 the event ("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 race, and/or in the promotion of this event, 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 I understand that videos and photos may be taken by event host I further agree to the release of photographic and video media.

Primary Adult Signature: _____ Date: _____

2nd Adult Signature if needed: _____ Date: _____

The liability waiver must be signed by individual members & BOTH ADULTS in a family membership.

Our insurance also requires completion one PRM waiver found below for each person.

Download an additional waiver if needed.



CLUB/ORGANIZATION/EVENT NAME: **HACKENSACK RIVER CANOE & KAYAK CLUB**

Event Date/CLUB Coverage Term : 01/01/2020 - 01/01/2021
Check here is paddler is a Guest: -----
Participation Date: _____

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If, however, 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 & 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 the event ("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.

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Address:

(Participant/Member Name: PLEASE PRINT) Phone:-----

Signature: _____ Date _____ Email: -----

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION) This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Participant Date of Birth (if under 18):

Parent/Legal Guardian Name & Address: (PLEASE PRINT) _____

Address: _____ Emergency Contact # _____

_____ Email: _____

Signature of Parent/Legal Guardian: _____ Date: _____



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Address: _____ Emergency Contact # _____

_____ Email: _____

Signature of Parent/Legal Guardian: _____ Date: _____