

KANAWHA SKI CLUB Membership Application July 1, 2024 - June 30, 2025 (please print)

Member name:		Over Age 21? (Yes / No)
*Children name(s):		
Address	· · · · · · · · · · · · · · · · · · ·	
City		StateZip
E-Mail Address		
		ircle one) Phone
Referred by		
Read & sign the Agreemen	t below and return this form to	address below:
	Individual Membership - \$	35
location, are eligible for indi- October through April, email	vidual membership. Your membe	olor, sex or creed, and regardless of geographic rship covers activities, monthly meetings held from unts for our trips. Your membership is good in same household.
	<u>AGREEME</u>	<u>NT</u>
Club, its officers, directors,	and each and every member there loss to me or any member of n	polity claims or demands against the Kanawha Ski reof, which may arise out of, or be related to, any many family by reason of such club membership and
	ion of the Board of Directors, my Council, Inc and the National Ski	membership in the Kanawha Ski Club also includes Council Federation
Member's	Signature	Date
Find us on Facebook or check	on the first Tuesday of each month, k out our website at <u>www.kanawhas</u> further information or to join a com	skiclub.com for meeting locations, trips, and activities.
Mail form and check to:		
Kanawha Ski Club		
P.O. Box 10353	-2.57	
Charleston, WV 25	0357	
Email: KanawhaSkiClub@	gmail.com	
For office use only:		
Date Received:	Added to Membership File:	