

# High Park Hiking Club

<http://www.hphc.ca>

## Membership Application 2017

Name		Member #
Address line 1		
Address line 2		
City, Province		
Postal Code		
Email		
Phone	Home:	May we send you email? [y/n]
	Bus:	Cell:
Emergency Contact		Phone:

## Membership Fee Paid

\$10.00 <input type="checkbox"/>	Pay in person, or send cheque or money order to the address below.
----------------------------------	--------------------------------------------------------------------

## Mail Address

High Park Hiking Club  
9 Tepee Court,  
Toronto, Ontario  
M2J 3A8

## Release Waiver and Assumption of Risk

The undersigned hereby VOLUNTARILY ASSUMES ALL PHYSICAL AND LEGAL RISK OF INJURY, DEATH, DAMAGE TO PROPERTY, ECONOMIC LOSS OR LOSS OF ENJOYMENT, UPSET, DISAPPOINTMENT, DISTRESS OR FRUSTRATION incidental to any program, function or activity of High Park Hiking Club, and hereby further RELEASES AND DISCHARGES High Park Hiking Club, its officers and directors, members, agents and affiliated persons and organizations FROM ALL CLAIMS FOR DAMAGES FOR THE AFOREMENTIONED INJURY, DEATH, DAMAGE TO PROPERTY, ECONOMIC LOSS OR LOSS OF ENJOYMENT, UPSET, DISAPPOINTMENT, DISTRESS OR FRUSTRATION OR OTHER LOSSES, WHETHER CAUSED BY ANY PERSON'S NEGLIGENCE, OMISSION, INTENTIONAL ACT OR OTHERWISE, including but not limited to the failure of a member or participant to obtain or produce the necessary documentation for travel or admission to another country, failure of a member or participant to arrive at any departure point at the appointed time as designated by a trip leader, the need, in the discretion of a trip leader or a Director of High Park Hiking Club or his or her designate to change travel itineraries or substitute transportation, accommodation, meals or services or the exercise of discretion to dismiss a participant from a trip or activity by a trip leader or a Director of High Park Hiking Club, or his or her designate.

I hereby certify that I have read and do understand the RELEASE provisions of this document, further certify that I am over 18 years of age and acknowledge that my membership fee is non-refundable.



Please sign here

\_\_\_\_\_  
Membership not valid unless signed

\_\_\_\_\_  
Date