

WAIVER

Gloucester County Nature Club and/or its leaders, officers, members or representatives shall not be liable for any injuries, loss or damage to person and/or property, direct or consequential, arising out of any trips and/or activities of the Gloucester County Nature Club. The assumption of risk, which is inherent in this type of outdoor activity, is implied on the part of each person who attends any Gloucester County Nature Club trip, and every person participating in any of said trips and/or activities assumes all risk and liability in connection therewith.

Everyone participating in any activity of the Gloucester County Nature Club will be required to read the release of liability, protecting the Gloucester County Nature Club and/or its leaders, officers, members and representatives from liability.

Gloucester County Nature Club and/or its leaders, officers, members and representatives are not in any way responsible for the personal safety of the attendees. When walking along a road, keep to the left, facing oncoming traffic and walk in a single file. When walking along trails, do not follow too closely or move too fast for your safety and for the safety of others (avoid collisions and/or whipped branches). FOLLOW THE LEADER: If you forge ahead, you may find yourself alone. Responsible adults must accompany children under the age of 16. If you expect to drop out of the group early, please inform the leader. Report to one or more of the hikers if you intend to discontinue on the route.

MEMBERSHIP APPLICATION 2008-2009

New Member Renewal
 Paper Membership(\$20) - regular mail
 Electronic Membership(\$15) - newsletter via email; ***please provide email address below

Name: _____

Street: _____

City/State/ZIP: _____

Phone: _____ ***Email Address: _____

Please note any special knowledge you would be willing to share: _____

Would you be willing to serve on a committee? If so, which committee(s): _____

Are there other ways you could participate? If so, how?

Would you like to give a gift membership? If so, indicate Individual ____ or Family ____

Name: _____

Street: _____

City/State/ZIP: _____

Phone: _____

A note will be sent informing them of your gift membership in the GCNC, thank you.

I HAVE READ AND UNDERSTAND THE ABOVE WAIVER

Signature: _____ Date: _____