



# Edmonton Overlanders Orienteering Club

## of the Alberta Orienteering Association

Year of birth	Gender	Name
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Household name: \_\_\_\_\_

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

Postal Code: \_\_\_\_\_

Home phone number: \_\_\_\_\_

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

### EOOC ASSOCIATE RATE:

EOOC associate \$20 single, \$25 household \$ \_\_\_\_\_  
Make cheque payable to **EOOC** and mail to:  
EOOC Box 69082, Edmonton AB, T6V 1G7

**OR**

### AOA FULL MEMBERSHIP RATE:

includes club membership  
\$30 for first person  
\$15 for each additional person  
A discount of one third for:  
members 65 and over  
& full-time students

There is no charge for children 11 and under  
The maximum rate is \$55 per household \$ \_\_\_\_\_

Make cheque payable to **AOA** and mail to:  
EOOC Box 69082, Edmonton AB, T6V 1G7

\_\_\_\_\_ New Member

\_\_\_\_\_ Renewal

Membership year runs from January 1 - December 31

**All adult members please read, sign and have witnessed the release of all liability.**

### RELEASE OF ALL LIABILITY:

In consideration of acceptance of my application for membership in the Alberta Orienteering Association and EOOC I release and agree to save harmless and keep indemnified Alberta Orienteering Association, EOOC, all event organizers, and their respective agents, officials, servants, representatives and any and all persons who own or occupy any land which may be used for association or club activities (collectively "AOA") from and against all claims of every nature and kind however caused, arising out of, or in connection with my taking part in any association or club activities, not withstanding the same may have been contributed to or occasioned by the negligence of AOA. It is understood and agreed that this agreement is binding on myself, my heirs, executors and assigns.

It is further understood that Alberta Orienteering Association in this Release is contracting on behalf of itself and as agents for its officials, agents, servants, and representatives, and all event organizers, and EOOC, and any and all persons who own or occupy any lands which may be used for any association or club activities.

I am aware that participating in association or club activities may be hazardous. To induce AOA to allow me to participate in such activities, I acknowledge that I freely and voluntarily assume all risks associated with my participation.

DATED on \_\_\_\_\_ (date)

at \_\_\_\_\_ (place)

\_\_\_\_\_  
Signature Witness

\_\_\_\_\_  
Signature Witness

\_\_\_\_\_  
Signature Witness

### OFFICE USE:

Fee collected \_\_\_\_\_ cash/cheque \_\_\_\_\_

Date rec'd \_\_\_\_\_ Card Issued \_\_\_\_\_