

Membership Application

Caribou Hills Cabin Hoppers

P. O. Box 375
Clam Gulch, AK. 99568

www.akchch.org

chchmembership@gmail.com



Membership from 1/1/2022- 12/31/20__ New Renewal

Name: _____ Business Name: _____

Mailing Address: _____

City, State, and Zip: _____

Phone: _____ Cell: _____ Cell: _____
Text Text

E-Mail: _____ Name: _____

E-Mail: _____ Name: _____

Volunteer for committees.

- Kick Off Party Family Fun Day Fall Golf Classic Events - Fun Runs
 Trail Maintenance Grooming

Memberships received after November 1st will be considered to be paid in full through the end of the next calendar year.
We except Credit Card and PayPal, \$3 service fee for Individual & Family, \$6 service fee for Business.

- Individual:** \$50.00
 Family: \$75.00 Family: anyone Under the age of 18 or Disabled living in your household. All members sign and date waiver.

Family members: _____, _____, _____, _____, _____

- Business:** \$200.00 A family membership, a copy of your business card on our Website, Business page and FaceBook.
 Parking Pass for Gravel Pit: Individual 1 pass, Family 2 passes, Business 2 passes. Passes are nontransferable. Lost, stolen or additional passes will be a fee of \$50.

OUR MISSION

The "Caribou Hills Cabin Hoppers" is a non-profit volunteer organization established in 1987 to promote, develop, and secure recreational trails for public use. Our common goal is to preserve these trails for future generations to enjoy year round. Hikers, hunters, bikers, backpackers, cross-country skiers, dog mushers, snowmachiner's or anyone who desires to enjoy our great public lands. Proceeds are used to purchase and maintain our equipment, provide public access and develop safe trails. We are a volunteer organization, so please join us in our efforts. **Your membership is critical to our organization.**

Membership -Treasurer Use Only <i>Payment Date:</i>							
Cash <input type="checkbox"/>	Check #	PayPal <input type="checkbox"/>	CC <input type="checkbox"/>		XCL <input type="checkbox"/>	GMail <input type="checkbox"/>	Volunteer List <input type="checkbox"/>
					Tag #s		Cards <input type="checkbox"/> CY Tabs <input type="checkbox"/>

Volunteer Release and Waiver of Liability Form

This Release and Waiver of Liability (the "release") executed on _____(Date)
by _____ and _____ ("Volunteer's printed name")
releases Caribou Hills Cabin Hoppers, ("Nonprofit"), a nonprofit corporation organized and existing under the laws of the State of Alaska and each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services for Nonprofit and engage in activities related to serving as a volunteer.

Volunteer understands that the scope of Volunteer's relationship with Nonprofit is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that Nonprofit will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to Nonprofit.

1. Waiver and Release: I, the Volunteer, release and forever discharge and hold harmless Nonprofit and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Nonprofit. I understand and acknowledge that this Release discharges Nonprofit from any liability or claim that I may have against Nonprofit with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to Nonprofit or occurring while I am providing volunteer services.

2. Insurance: Further I understand that Nonprofit does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health, or disability benefits or insurance. I expressly waive any such claim for compensation or liability on the part of Nonprofit beyond what may be offered freely by Nonprofit in the event of injury or medical expenses incurred by me.

3. Medical Treatment: I hereby Release and forever discharge Nonprofit from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with Nonprofit.

4. Assumption of Risk: I understand that the services I provide to Nonprofit may include activities that may be hazardous to me including, but not limited to construction-related activities. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and Release Nonprofit from all liability.

5. Other: As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Alaska and that this Release shall be governed by and interpreted in accordance with the laws of the State of Alaska. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

Member Signature (Guardian If under 18)	Date	Printed Name
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Spouse Signature (Guardian If under 18)	Date	Printed Name
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