

NEW ENGLAND NORDIC SKI ASSOCIATION

# NENSA MEMBERSHIP REGISTRATION

Register at [www.nensa.net](http://www.nensa.net) or fill out the form below.

## Individual Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Previous NENSA # \_\_\_\_\_

Parent/Guardian Name, if individual is under 18 years of age \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male \_\_\_ Female \_\_\_ NENSA Club Name \_\_\_\_\_

## Additional Family Members - of immediate family and same address

Name _____	Date Of Birth _____	Previous NENSA # _____
Name _____	Date Of Birth _____	Previous NENSA # _____
Name _____	Date Of Birth _____	Previous NENSA # _____
Name _____	Date Of Birth _____	Previous NENSA # _____

**Username:** \_\_\_\_\_ **Password:** \_\_\_\_\_ **(REQUIRED: provides online access for entire family)**

## Dues Worksheet

<b>Individual Member</b>		
NENSA Club Affiliated*..... (add \$5 after 11/1)	\$30	= \$ _____
Unaffiliated ..... (add \$5 after 11/1)	\$40	= \$ _____
Recreational*** ..... (add \$5 after 11/1)	\$25	= \$ _____
Youth / BKL (under 14 on 12/31/08).....	\$20	= \$ _____
<b>NENSA Coaches Association (must also be a NENSA member)</b>		
Coaches Association members receive discounts on NENSA coaches clinics, workshops and NENSA publications.	\$20	= \$ _____
<b>Additional Family Members**</b>		
NENSA Club Affiliated* ..... (add \$5 ea after 11/1)	___ @ \$20 ea	= \$ _____
Unaffiliated ..... (add \$5 ea after 11/1)	___ @ \$30 ea	= \$ _____
Recreational*** ..... (add \$5 ea after 11/1)	___ @ \$25 ea	= \$ _____
<b>BKL (under age 14 on 12/31/07) Members</b> .....	___ @ \$20 ea	= \$ _____
<b>NEW for '09 Paperless Membership: Help NENSA Save Resources &amp; Avoid Extra Mail.</b> Check here to receive all membership materials by email: [ ]		
<b>Special Memberships and Additional Contribution:</b>		
Contributing, \$100; Life \$500; Life (Couple), \$600	\$100	
Your additional support of NENSA is tax-deductible. NENSA is a non-profit, 501(c)3 corporation. For more information about supporting NENSA's programs or endowment, contact Patrick Cote, <a href="mailto:pat@nensa.net">pat@nensa.net</a> .	\$500	= \$ _____
	\$600	
	Any Amount	
<b>TOTAL DUES</b>		= \$ _____

\***NENSA Club Affiliation:** In order to claim a NENSA Club affiliation discount your club must be registered with NENSA. If you have any questions about which clubs are registered, or if there is a club near you, check the NENSA website: [www.nensa.net](http://www.nensa.net).

\*\* **Additional Family Members** joining NENSA must be of immediate family, join together and share the same address.

\*\*\* **Recreational Members:** To participate in an Eastern Cup or Championship event, Recreational Members must become Full Members. You may upgrade to Full Membership at any time by sending your Membership Card and \$5 for Club-affiliated members, \$15 for Unaffiliated members, to the address below.

**Every member must sign the Waiver and Release on the back of this form. Make checks payable to: NENSA. Mail to: NENSA, 49 Pineland Dr, Suite 301A, New Gloucester, ME 04260**

NEW ENGLAND NORDIC SKI ASSOCIATION

## NEW ENGLAND NORDIC SKI ASSOCIATION WAIVER AND RELEASE OF LIABILITY

In consideration for the rights and privileges associated with membership in the New England Nordic Ski Association, I acknowledge and agree to be bound by the following:

1. Identification of Risks. I understand that participation in any skiing activity, including but not limited to, preparation for, participation in, and coaching of activities in cross-country ski competitions and clinics, involve risk of serious injury, including permanent disability, death and other losses, due to inactions or negligence of myself or others.
2. Assumption of the Risk. I agree that I am responsible for my safety while participating in activities associated with NENSA, and that such responsibility includes participation only a) when I am both physically and psychologically prepared to participate safely, b) after fully familiarizing myself with the venue before beginning the activity, and c) while using the equipment of a type and condition reasonably necessary to safely participate. I assume all risk connected with responsibility for any injury or loss connected with my participation.
3. Waiver. Aware of the risks and willing to assume them, I hereby release and agree to hold harmless the New England Nordic Ski Association (NENSA), its officers, directors, employees, agents, coaches, trainers, doctors, officials, volunteers, affiliates, event organizers, sponsors, owners of property and trails used by me (Released Parties) from loss, injury, or death to myself or to any other person, or other damage to person or property resulting from my participation in events and competition and any related activities including, without limitation activities in connection with sponsorship, organization or execution of any event and travel to and from such event, whether I may participate as an athlete, coach, volunteer, spectator, or in any other manner associated with NENSA. This release is intended as a waiver of any claim I may have whether based upon negligence, breach of warranty, contract or other legal theory, against any of the above Released Parties, accepting myself the full responsibility for any such loss, injury, death or damage which may result. I intend for this release to also apply to my relatives, personal representatives, heirs, beneficiaries, next of kin, and assigns. If any part of this agreement is determined to be unenforceable, all other parts shall be given full force and effect. This waiver does not release acts of gross negligence or willful and wanton misconduct of any party.
4. Insurance. I currently have, and agree to maintain throughout the time that I train and compete, valid and sufficient medical and accident insurance. I understand that this is my sole responsibility and release all persons and entities from providing this coverage for me.
5. Image. I grant permission to NENSA to use my name, and any photograph, video, image, results or record of me from any NENSA event for all purposes NENSA may choose.

Signature\*: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

\*Parent or guardian signature if member/s is/are under 18 years of age.

Additional Family Members

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_