

CORVETTE CLUB OF NOVA SCOTIA ("CCNS") MEMBERSHIP APPLICATION / RENEWAL FORM *

Membership fee must accompany this application form.

Membership includes primary member, partner & dependent children

Date of Application:	nth / Day / Year)	Anı	nual Membership Fee:	<u>\$40.00</u>
Name 1:				
Name 2:				
New Application (Yes/No):				
Address:				
City:				
Phone: (Home)		(Cell)		
E-mail 1:				
E-mail 2:				
Year of Corvette:	Model:	(Over Over the Over Over 700 7DA)	_ Colour:	
Year of Corvette:			_ Colour:	
*		(Coupe, Convertible, Grand Sport, Z06, ZR1)		

*IMPORTANT NOTE SUBMISSION OF THIS APPLICATION FORM TO CCNS CONSTITUTES:

- 1. YOUR ACKNOWLEDGEMENT AND ACCEPTANCE OF THE RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, ATTACHED AS EXHIBIT A, SUCH ACKNOWLEDGEMENT AND ACCEPTANCE TO REMAIN IN EFFECT FOR AS LONG AS MEMBERSHIP AND/OR PARTICPATION IN CCNS ACTIVITIES CONTINUE; AND
- 2. YOUR CONSENT TO HAVING YOUR PERSONAL INFORMATION DISTRIBUTED INTERNALLY TO CCNS BOARD MEMBERS AND COMMUNICATIONS AND EVENTS COORDINATORS FOR CCNS OPERATING PURPOSES, AS WELL AS YOUR NAME(S), CITY & CAR(S) INCLUDED IN CCNS MEMBER LISTS AND COMMUNICATIONS FROM TIME TO TIME. YOUR PERSONAL INFORMATION IS NOT DISTRIBUTED EXTERNALLY OF CCNS.

Membership includes Corvette and other car shows, CCNS window decal, monthly newsletters, cruises and road trips, BBQ'S, member website, Christmas party, plus new friends and plenty of free advice!!

Membership fee can be paid by cheque payable to <u>Corvette Club of Nova Scotia</u> and mailed to the address listed below or by cash in person to Rick Latimer. We are not able to accept credit card payments.

Please Return To: Corvette Club of Nova Scotia

C/O Rick Latimer, Treasurer

249 Freshwater Trail Dartmouth, NS, B2W 0G6

E-mail: <u>r.latimer@ns.sympatico.ca</u>

Website: www.corvetteclubofnovascotia.ca

EXHIBIT A

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

By submission of the Corvette Club of Nova Scotia ("CCNS") membership application form, I hereby acknowledge that I have voluntarily chosen to participate in CCNS. I recognize that the activities of CCNS involve risk of injury, and I agree to accept and assume any and all risks associated with them, whether known or unknown, including, but not limited to property damage or loss, minor bodily injury, severe bodily injury, and death. Furthermore, I recognize that participation in CCNS activities involves risks incidental thereto, including, but not limited to travel to and from meetings, events, cruises, car shows, and the possible reckless conduct of other participants. I am voluntarily participating in the activities with the knowledge of the risks involved and hereby agree to assume any and all inherent risks of property damage, bodily injury, or death, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERS, and assume full responsibility for my participation.

In consideration of my participation in the activities and to the fullest extent permitted by law, I agree to indemnify, defend and hold CCNS, its officers, directors, employees, agents, volunteers and assigns (the "Releasees") from and against all claims arising out of or resulting from my participation in CCNS activities, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE. "Claim," as used in this agreement, means any financial loss, claim, suit, action, damage, or expense, including, but not limited to attorney's fees attributable to bodily injury, sickness, disease or death, or injury to or destruction of tangible property including loss of use resulting therefrom.

In addition, I hereby voluntarily hold harmless CCNS, its officers, directors, employees, agents, volunteers and assigns from any and all claims, both present and future, that may be made by me, my family, estate, heirs or assigns. I also understand that CCNS does not provide any medical, dental or life insurance to cover bodily injury, illness or death, nor insurance for personal property damage or loss, nor insurance for liability arising out of my negligent acts or omissions. I acknowledge that I am completely responsible for my own insurance to cover these expenses.

I further understand that this acknowledgment of risk, hold harmless and release of liability is intended to be as broad and inclusive as permitted by the laws of the province of Nova Scotia, and that if any portion hereof is held invalid, I agree that the balance shall, notwithstanding, continue in full legal force and effect.

I agree that this release of liability and assumption of risk agreement is effective for as long as I am a member of CCNS and / or a participant in the activities of CCNS.