

Nicola Nordic Ski Club

Membership Application Form

Season 2025-26

Membership Type

■ Individual Membership \$50.00

■ Family Membership \$90.00

(includes all dependent children under 19 y

Primary Member Information

Full Name: _____

Email Address: _____

Phone Number: _____

Mailing Address: _____

City/Town: _____ Province: _____

Postal Code: _____

Additional Family Members (if Family Membership)

List all dependent children under 19 years of age and second adult

Name	Date of Birth
_____	_____
_____	_____
_____	_____

Emergency Contact

Name: _____

Phone Number: _____

Relationship: _____

Liability Waiver and Assumption of Risk

I/We acknowledge that cross-country skiing and snowshoeing involve inherent risks, including but not limited to: personal injury, property damage, and in extreme cases, death. I/We understand that the Kane Valley Ski Trails are not patrolled and are maintained by volunteers. I/We agree to use the trails at my/our own risk.

I/We hereby release, waive, discharge, and covenant not to sue the Nicola Nordic Ski Club, its board members, volunteers, and any affiliated organizations from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury that may be sustained by me/us or any property belonging to me/us while participating in skiing or snowshoeing activities, or while on the premises owned or leased by the Nicola Nordic Ski Club.

I/We certify that I am/we are physically fit and have sufficiently trained for participation in cross-country skiing and snowshoeing activities. I/We acknowledge that I have/we have read this waiver and fully understand its contents. I/We voluntarily agree to the terms and conditions stated above.

For Family Memberships: I/We, as parent(s) or legal guardian(s), also give permission for my/our dependent children listed above to participate in skiing and snowshoeing activities at Kane Valley Ski Trails, and I/we agree to the terms of this waiver on their behalf.

Signatures

Primary Member Signature: _____ **Date:** _____

Print Name: _____

Second Adult Signature (if Family): _____ **Date:** _____

Print Name: _____

Payment Information

Payment Options:

1. E-Transfer (Recommended):

- Send payment to: nicolanordic@gmail.com
- Include your name in the message
- Email or photo of completed form to the same address

2. Cheque Payment:

- Make cheque payable to: Nicola Nordic Ski Club

- Drop off with completed form at: Breathe Bikes, Merritt, BC

Questions? Email us at nicolanordic@gmail.com

Nicola Nordic Ski Club | 250 Kane Valley Road, BC V0X 1W0 | nicolanordic@gmail.com
Thank you for supporting cross-country skiing in the Nicola Valley!