



Annual Membership Application

Individual (*adult 18 years and older*) - \$25

Family (*parents and immediate family members under 18 years, living in same household*) - \$40

To avoid guest fees at social events, family membership is encouraged.

Name: _____ DOB: _____

Address: _____

Phone: (H) _____ (C) _____

Email: _____

Family Membership: Spouse _____

Children: _____

Disclaimer of Liability: The Little Heiskell Ski Club (LHSC) is a non-profit organization that arranges trips and activities for the enjoyment of its members. LHSC and its officers and designees expressly disclaim responsibility and/or liability of any nature whatsoever for loss, damage or injury occurring during any trip or activity that LHSC arranges, organizes, sponsors or manages. I have read this disclaimer, understand it, and agree to abide by its provisions.

Signature: _____ Date: _____

Make check payable to the **Little Heiskell Ski Club** and mail to:
Anita Wade 9728 Pembroke Dr Hagerstown, MD 21740