



# AMERICAN CANOE ASSOCIATION MEMBERSHIP FORM



All participants in ACA-insured activities must be ACA members in one of the following categories (choose one):

I am currently an ACA member. My member number appears below. (Check here if renewing with this form <input type="checkbox"/> ) <input type="checkbox"/>	I would like a one-year ACA Paddle America Club Membership for: (check & circle one) <input type="checkbox"/> Individual \$30   Family (2 adults + minors) \$40	I would like a one-year ACA Membership for: (check & circle one) <input type="checkbox"/> Individual \$40   Family (2 adults + minors) \$60
I would like a one-year Senior (62+) or Student Membership for \$25 (under 18, or under 23 with copy of student ID) <input type="checkbox"/>	I would like an ACA Introductory Membership for \$15 (Six month membership with benefits, including a <i>Rapid Media</i> magazine) <input type="checkbox"/>	I would like an ACA Event Membership for \$5 (one activity membership, no member benefits) <input type="checkbox"/>
As a new or renewing ACA member, my <i>Rapid Media</i> magazine choice is:		Print <input type="checkbox"/> Digital <input type="checkbox"/>
<i>Canoeroots</i> <input type="checkbox"/>	<i>Rapid</i> <input type="checkbox"/> <i>Kayak Angler</i> <input type="checkbox"/>	<i>Adventure Kayak</i> <input type="checkbox"/>

## AMERICAN CANOE ASSOCIATION ADULT WAIVER & RELEASE OF LIABILITY READ BEFORE SIGNING

IN CONSIDERATION of being permitted to participate in any way in the American Canoe Association, Inc. sports and recreation program and related activities ("Activities") I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of paddlesports and related activities and that I am qualified, in good health, in proper physical condition to participate in such activity and willingly agree to comply with the stated and customary terms and conditions of participation. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. If I decide to leave early and not complete the trip as planned, I assume all risks inherent in my decision to leave.

2. FULLY UNDERSTAND that: (a) Paddlesports and related ACTIVITIES INVOLVE RISKS AND DANGERS OF DAMAGE TO PERSONAL PROPERTY AND SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the American Canoe Association, Inc., its Paddle America Clubs, affiliated clubs and organizational affiliates, their respective ACA certified instructors, certified instructor trainers, and certified instructor trainer educators, administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, DAMAGE TO PROPERTY, OR OTHER DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Name (print) \_\_\_\_\_ Date of Birth \_\_\_\_\_ ACA # (if any) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Date \_\_\_\_\_ Adult Signature \_\_\_\_\_

Name / Description of Activity or Event \_\_\_\_\_

Sponsoring Club / Organization \_\_\_\_\_ Activity Date \_\_\_\_\_



# Waiver and Release of Liability - Adult

## Read Carefully

In consideration of QAJAQ USA, Inc. furnishing services and/or equipment to enable me to participate in the Delmarva Paddlers Retreat, I agree as follows:

I fully understand and acknowledge that recreational activities have: (a) inherent risks, dangers and hazards, such exists in my use of QAJAQ USA, Inc. equipment and my participation in QAJAQ USA, Inc. activities; (b) my participation in such activities and/or use of such equipment may result in injury or illness including, but not limited to bodily injury, disease, strains, fractures, injuries to the neck or spine, partial and/or total paralysis, death, or other ailments that could cause serious disability; (c) these risks and dangers may be caused by the negligence of the owners, employees, officers, or agents of QAJAQ USA, Inc.; the negligence of others, accidents, breaches of contract, forces of nature, or other causes. Risks and dangers may arise from foreseeable and unforeseeable causes including but not limited to, guide/supervisor decision making, including that a guide/supervisor may misjudge terrain, weather, trail or water route, location, or conditions, risks of falling out of or drowning while in a kayak, canoe, or raft, and other such risks, hazards and dangers that are integral to recreation activities and/or use of equipment, **I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of the owners, employees, officers, or agents of QAJAQ USA, Inc., or by any other person.**

I, on behalf of myself, my personal representatives, and heirs hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify QAJAQ USA, INC. and its board members, advisors, instructors, Guides, agents, officers, and volunteers from any and all claims, actions or losses of bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my use of QAJAQ USA, Inc. equipment or my participation in QAJAQ USA, Inc. activities. **I specifically understand that I am releasing, discharging and waiving any claims or actions that I may have presently or in the future for the negligent acts or other conduct by the owners, employees, officers, or agents of QAJAQ USA, Inc.**

The venue of any dispute that may arise out of this agreement or otherwise between the parties to which QAJAQ USA, Inc. or its agents is a party shall be in the State of Florida.

**I have read the above waiver and release and by signing agree with the above. It is my intention to exempt and relieve QAJAQ USA, Inc. and its board members, advisors, instructors, Guides, agents, officers, and volunteers from liability for personal injury, property damage or wrongful death caused by negligence or any other cause.**

_____	_____	_____
signature	age	date
_____	<div style="border: 1px solid black; padding: 5px;"> <p>Do you have any medical or physical conditions that we should be aware of in case of emergency?</p> <p>circle one:     <b>Yes</b>     <b>NO</b></p> <p>If "Yes" please detail on Personal Info Page</p> </div>	
name (printed)		
_____		
street address		
_____	_____	_____
town	state	zip code

**Activity: Rope Gymnastics, Paddle Making, QAJAQ Building Workshops, and Mitt Making.**