



Membership Application Form

Date: _____

- Memberships run from January 1 to December 31.
- Pets are only allowed on outings designated as pet friendly.

Membership Type

_____ Membership renewal _____ New application*

** Applications for first-time membership received after September 15 are valid to December 31 of the following year.*

Membership Fee (fees subject to change)

_____ Individual \$20.00 _____ Couple or Family \$30.00

Adults

1. _____ 2. _____
3. _____ 4. _____

Youths (under age 18)

1. _____ 2. _____

Note: *Any youth under the age of 18 must be accompanied by an adult.*

E-Mail Address: _____

Mailing Address: _____

Postal Code: _____ **Phone:** _____

Please mail Application Form and Cheque or Money Order to:

**Thunder Bay Hiking Association
P.O. Box 10041
Thunder Bay, ON P7B 6T6**

revised: September 2016

Dear Member: The TBHA is committed to conducting outings where the well-being and safety of all members and guests is the highest priority. This is a copy of the Waiver Form that you will be signing at the start of each hike or activity organized by the Thunder Bay Hiking Association (THBA). To ensure that our members are aware of their responsibilities and the risks assumed when participating in a TBHA activity, we are asking each member to read, sign, and submit this declaration as part of the Membership Form. If you have any questions or concerns, please contact the President of the TBHA at President@tbha.ca.

Waiver of Liability and Assumption of Risk – THUNDER BAY HIKING ASSOCIATION INC.

I acknowledge that this activity organized by the Thunder Bay Hiking Association Inc. (henceforth the TBHA), and in which I am participating, may involve risks that are beyond the control of the TBHA. This activity may include hiking, cross-country skiing, bicycling, snowshoeing, trail building and maintenance and canoeing and kayaking. I affirm that I am aware of the nature of this activity, its length, duration and degree of difficulty and that I am properly equipped and physically able to participate; I have no known medical or other condition which might preclude my participation; and I understand that it is my responsibility to inform the Hike Leader, or the President of the TBHA, of any incident or accident as soon as practicable. I agree that I am responsible for any cost associated with the emergency evacuation of my person or belongings. I agree to follow the rules and conditions of the activity as set out by the TBHA and the Hike Leader. If at any time I choose to withdraw from this activity, I will sign off on this Waiver form by drawing a line through my name, initialing beside my name, and writing the time. The Hike Leader will then initial beside my initials. Notwithstanding the acknowledgement of the risks associated with this activity, I hereby release Hike Ontario, the Thunder Bay Hiking Association Inc., its contractors, employees, volunteers, agents, assigns and executors from all claims for damage however so arising as a result of my participation in this activity organized by the TBHA.

Thunder Bay Hiking Association reserves the right to publish images taken during our events for use in various forms including but not limited to, photos/videos used in print and on social media sites, including Facebook, Twitter, Instagram, web content, newsletter and/or advertising. Your agreement to become a member(s) of the TBHA grants us the right to use your image as described above without your written or expressed permission at the time the image is captured or published. Any member who does not agree to have his/her image published is required to advise the Hike Leader at the start of each event he/she attends.

Each family member to sign and date below.

Note: In the case of a minor (under the age of 18 years), the minor's parent or legal guardian must sign and date this declaration on behalf of the minor.

Name (please print) _____

Signed: _____ Date: _____

Name (please print) _____

Signed: _____ Date: _____

Name (please print) _____

Signed: _____ Date: _____

(Signature of parent or guardian for a minor under 18 years of age)

Name (please print) _____

Signed: _____ Date: _____

(Signature of parent or guardian for a minor under 18 years of age)