



ALBERTA WILDLIFE CARVING ASSOCIATION

MEMBERSHIP FORM

NAME: _____ PHONE: _____

ADDRESS: _____ EMAIL: _____

CITY: _____ POSTAL CODE: _____

MEMBERSHIP FEE: \$25.00/ANNUALLY.
CHECKS CAN BE MADE OUT TO AWCA.

NEWS LETTER: EMAIL or MAILED
(Please circle your choice)

AUTHORIZATION TO RELEASE PERSONAL INFORMATION (optional)

I _____ authorize AWCA to release my personal information (i.e. Name, address, phone and email) to other members, companies and associations with in the carving community.

Signed _____

Date _____

I _____ Consent to receive electronic communications from the Alberta Wildlife Carving Association

Signed _____

Date _____

CHECKS PAYABLE TO: ALBERTA WILDLIFE CARVING ASSOCIATION or AWCA.
Checks and Membership Forms can be mailed to:

Russ Mann
8961 Strathern Dr.
Edmonton, Ab.
T6C 4C8

LIABILITY RELEASE
(Mandatory)

As a member of the Alberta Wildlife Carving Association (AWCA), I, my family or guest in consideration of my being allowed to participate in the events, meetings, activities, courses, functions and/or competitions (all of which are referred to as "the events") of The Alberta Wildlife Carving Association, I hereby for myself, my heirs, executors, administrators, and assigns release and forever discharges agents, volunteers and instructors [including all members, family or guest connected with the organization] (all of which are now referred to as The Alberta Wildlife Carving Association) from any and all lawsuits or actions, claims or demands by reason of any damage, loss, death or injury to myself or to my property arising from my participation in the events notwithstanding that the same may have been contributed to or occasioned by the negligence of The Alberta Wildlife Carving Association.

(Guests in this document means; any non-member, whether visiting or being paid or volunteering as a judge, presenter or instructor.)

I agree to save and hold harmless and indemnify The Alberta Wildlife Carving Association from and against all lawsuits, claims, actions, cost or expenses in respect to any death, injury, loss, damage to myself or my property howsoever caused arising out of or in connection with the events and whether the same may have been contributed to or occasioned by the negligence of The Alberta Wildlife Carving Association.

I further recognize and acknowledge that I am entering into this release agreement with The Alberta Wildlife Carving Association on its own behalf and on behalf of its officers, directors, managers, servants, agents, volunteers and instructors.

It is the responsibility of all members to inform any family member or guest of this disclaimer.

I have read and agree to all conditions of this release form and agree to observe all rules and decisions of the Alberta Wildlife Carving Association.

Please print name _____ Date _____

Signature _____