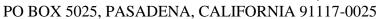


## MEMBERSHIP APPLICATION FORM for the

## PASADENA LAPIDARY SOCIETY, Inc.





We welcome new members. Please complete and return both pages of this application. For a calendar of events, please visit our website at www.pasadenalapidary.org.

Name:		Occupation.		
Name of Junior(s) (under 18 years old):				
Address:	Apt. #	City	Zip:	
Phone #: ( )	E-mail Addres	ss:		
We do not accept Junior applications under age must always be accompanied to PLS activities b			primary applicant. Minor children	
First year's dues must accompany this application	on (no refunds)	. Initiation fee includ	es badge.	
First Adult - \$25 + \$10 initiation fee Second Adult in household - \$15 + \$10 initi Each additional Adult in household - \$10 + Each Junior (under 18 years old) - \$10 + \$1	iation fee \$10 initiation f	\$ 25.00 ee\$ 20.00	SELECT ONE: I prefer a membership badge that attaches with a: magnetpin	
<ul> <li>Questions</li> <li>How did you hear about the Pasadena L</li> <li>Have you now or in the past, belonged to If Yes, which club(s)?</li> <li>Do you hold or did you hold any leaders o If 'Yes': Position(s) held?</li> </ul>	to this or any ot	her lapidary club?tee position?		
Our society offers the following. Please check	any items tha	t interest you.		
Jewelry MakingCarving StonesBeadingOther				
The success of the Pasadena Lapidary Society sharing of members' skills, knowledge, encourathe lapidary arts.				
To assist us in this endeavor, please check the	e areas that yo	u are willing to be inv	olved with:	
AdvertisingDoor PrizesGreeter	Programs a	and SpeakersYearbo	ook Publicity	
Website ManagementNewsletter ReporterNewsletter Articles WriterNewsletter Editor				
PhotographerBookkeepingRef	reshments	_School Presentations C	Other	
Membership Chairperson				
Date App rec'd: By: Amt rec'd: \$	Ву:	Payment:CashPay	/palCheck#Rect#	
Vaiver signed? Y or N Appr'd by Board?		Notified by:		
CHECKLIST:	b bulletin Editor	Badge ordered	Add to roster	
ividinadiding dara givenivalle to	, balletii Luitui	bauge oldered		

## PARTICIPANT RELEASE OF LIABILITY

## - READ BEFORE SIGNING -

In consideration of being allowed to participate in any way in the **PASADENA LAPIDARY SOCIETY** sanctioned activities, the undersigned acknowledges, appreciates, and agrees that:

- 1. The risk of injury from the activities involved in these programs is significant, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury to me does exist; and,
- 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
- 3. I willingly agree to comply with the stated and customary terms and conditions for participation. If I observe any unusual significant concern in my readiness for participation and/ or in the program itself, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
- 4. I, for myself and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE the **PASADENA LAPIDARY SOCIETY**, their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my involvement or participation in these programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
- 5. I, for myself and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releasees from any and all liabilities incident to my involvement or participation in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

XPARTICIPANT SIGNATURE	Date Signed:
PRINT NAME:	
ADDRESS:	
TELEPHONE:	
If signing as parent or legal guardian of a junior member:	
Print junior member's name(s)	