



Membership Application, Waiver, Release And Covenant Not To Sue

Annual Dues are \$20.00 per year for the 12 month period of January through December. If paid prior to March 1st a \$5.00 discount is offered. Please forward this completed form along with a check made out to BGBC to *Karen Ash, 865 Colonel Fetters Road, Clearville, PA 15535.*

NAME _____

ADDRESS _____

CITY _____ STATE _____

ZIP _____ PHONE _____

EMAIL _____

By my signature below, I acknowledge all activities of the Basketweavers Guild of Bedford County, including the annual “ Weaving Your Cares Behind” conference (known as BGBC and WYCB) are undertaken by volunteers using their own time and funds for their efforts, and I hereby waive, release and cancel any and all claims I may have against BGBC, its officers and committee members arising out of the functions and activities of BGBC. I agree not to sue or bring claim of any nature whatsoever against BGBC and/or WYCB and any and all persons acting on behalf of BGBC relating to any BGBC function or activity. I further acknowledge that participating in any basket weaving activity may have the potential for harm or personal injury, and it is an activity in which I have freely chosen to engage. I also give my permission for any photographs taken at any BGBC or WYCB function to be used for publicity purposes.

Signature: _____