



2017 Annual Membership Form

Processed by _____

Sheet # _____

Date in MSC _____

PLEASE PRINT

Today's Date: _____

Member 1: _____ Member 2: _____

Date of Birth _____ M ___ F ___ Date of Birth _____ M ___ F ___

Phone 1: _____ Phone 2: _____

Email 1: _____ Email 2: _____

Mailing Address: _____

City _____ Zip _____

Emergency Contact: _____

Relationship: _____ Phone: _____

New Member - Clark County (\$15)

New Member - Out of County (\$50)

Renewal - Clark County (\$15)

Renewal - Out of County (\$50)

Associate – Special Circumstances (\$10)

(Specific Purpose = Travel Only or Companion to a Member)

How did you hear about USS? _____

Payment Method: Cash _____ Check _____ *Make payable to United Senior Services

I would like to donate to the USS Golden Fund to support membership for Clark County seniors who cannot afford one. Amount of Gift \$ _____

United Senior Services Center Policies and Procedures are available to all members. Please see any staff person to answer a question or to request a copy.

Liability Waiver: BACK OF PAGE – to be signed

Agreement as to Conduct

I shall comply with all rules, regulations, and policies of United Senior Services (USS) regarding travel programs, activities and events I participate in, and the use of its facilities and equipment. While on USS premises I shall conduct myself in a controlled and reasonable manner at all times.

As used herein and in the following Liability Waiver, “facilities” and “premises” shall include not only the principal location of USS but also its satellites and all parking areas.

Liability Waiver

In consideration of my participation in travel programs, activities and events, and/or the use of the facilities and equipment provided by USS or used at a USS function:

- I agree, on behalf of myself, my heirs, executors, administrators, and assigns, that USS, its employees, officers, directors, agents, associates, volunteers and subcontractors, shall not be liable for any damages arising from personal injuries (including death) sustained by me as a result of the use of the equipment or facilities of USS or at a USS function.
- I agree to indemnify and hold USS harmless against any and all claims, demands, damages, rights of action, or causes of action, of any person or entity, that may arise from injuries or damages caused by me with respect to the use of the facilities and equipment of USS or at a USS function.
- I agree to be solely responsible for my safety and well-being and understand that USS does not provide supervision or assistance for the use of the facilities and equipment. I understand and acknowledge that the use of exercise equipment and facilities involves risk of serious injury and agree to refrain from using any equipment in a manner inconsistent with its intended design and purpose.
- I understand and agree that USS is not responsible for property that is lost, stolen, or damaged while participating in USS programs, activities, or events or about the premises.

I HAVE READ THE FOREGOING AGREEMENT AND WAIVER OF LIABILITY AND VOLUNTARILY EXECUTE THIS DOCUMENT WITH FULL KNOWLEDGE OF ITS CONTENT.

Member 1 Signature

Member 2 Signature

Date: _____

Date: _____