

Belle River & District Horticultural Society Application for Membership 2011 - 2012

Yearly Memberships are from September 1st through August 31st

Please fill in the information below and sign the release

Make your cheque payable to: Belle River & District Horticultural Society
If mailing, please mail to: 1545 County Road 27, Belle River, ON N0R 1A0

Please mark which of the following applies to your application:

() New Member () Renewal () Junior Member

Mr. / Mrs. / Miss / Ms. _____

Mailing Address: _____

Phone Number: _____

If you would like to have website updates and other notices delivered electronically, please provide your e-mail address (kindly PRINT clearly):

PLEASE PRINT clearly

<p>\$10.00 per year for adult membership \$1.00 per year for junior membership - ages 6 to 14</p>

WAIVER & INDEMNITY

In consideration of the approval of my application for membership in the Belle River & District Horticultural Society ("Society") and the granting of such membership, the undersigned hereby waives and releases each of its directors, officers, servants and members from time to time, from all liability including vicarious liability for any loss or injury howsoever caused resulting from the act or omission of any director, officer, servant or member of the Society. Furthermore, the undersigned hereby agrees to promptly indemnify and save harmless the Society and each of its directors, officers, servants and members from and against any damages, liabilities, claims and demands whatsoever arising out of, pursuant to or connected with any act or omission of the undersigned.

Signature: _____

Date: _____