

**La Belle Fencing Club
Membership Application**

Name: _____

Birth date: _____ Age: _____

Mailing Address: _____

City _____ State: _____ Zip: _____

Phone: _____

Email : _____

USFA Membership Number: _____
(leave blank if you're a new member)

Please check one:

- New Member Attending First Fencing Class, \$40
- New Member, \$50
- Renewal, \$50

All club members MUST join the USFA. Club membership is \$50 per year. The club's fiscal year is August 1 through July 31. Membership is not pro-rated, but members joining after April 1 will be credited membership through the following year.

New members attending their first fencing class will receive a 3 month trial membership. USFA membership is not required until the trial membership has expired.

I agree to follow the by-laws of the La Belle Fencing Club, rules of the U.S. Fencing Association, the reasonable directions of club coaches and other officials responsible for the safety and efficiency of a fencing activity. I also agree to return all club equipment should I decide to no longer participate with the club, or at any time as directed by a club officer.

Member Applicant Date

Parent or Guardian if applicant is under 18 Date

La Belle Fencing Club
Medical Treatment Release for Participants

In case of medical emergency I agree to permit medical treatment of the participant by any licensed physician and transport to an emergency room if necessary.

In the event of an emergency, the club will contact the person listed on the registration form as the emergency contact.

Please list any medical conditions, history or medication requirements that may be relevant to participation in sports:

Primary care physician's name and contact information:

Date: _____

Participant's Printed Name: _____

Participant's Signature: _____

If participant is under 18:

Parent/Guardian's Printed Name: _____

Parent/Guardian's Signature: _____

**LA BELLE FENCING CLUB
WAIVER AND RELEASE OF LIABILITY**

In consideration of being allowed to participate in any way in the La Belle Fencing Club, related events and activities, the undersigned acknowledges, appreciates and agrees that:

1. The risk of injury from the activities involved in the program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury 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, however, I observe any unusual significant hazard during my presence or participation, 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 heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS THE LA BELLE FENCING CLUB, their respective 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) (all hereinafter referred to as "Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

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.

Participant's Signature

Date

Printed Name

**FOR PARTICIPANTS OF MINORITY AGE
(UNDER AGE 18 AT TIME OF REGISTRATION)**

This is to certify that I, as parent with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE.

Parent/Guardian's Signature

Date

Printed Name