

**CAPE COD CORVETTE CLUB  
MEMBERSHIP RENEWAL/APPLICATION/ FORM**

Please mail completed form and check to:

Cape Cod Corvette Club, C/O Charles Azinger, 18 Topco Rd., Brewster, MA 02631

Annual Membership Dues Renewal **\$60** - Annual New Membership Dues **\$75**(includes Name Tags)

Please Make Checks Payable to Cape Cod Corvette Club

Date \_\_\_\_\_ Renewal \_\_\_\_\_ New \_\_\_\_\_

Name \_\_\_\_\_ / Spouse/Partner \_\_\_\_\_

**New Members:**

Name Tag #1 Exact Name \_\_\_\_\_ e.g. Rick Smith

Name Tag #2 Exact Name \_\_\_\_\_

**IF RENEWING, FILL IN ANY INFO THAT HAS CHANGED SINCE LAST YEAR.**

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ Date of Birth \_\_\_\_\_ / (Month Day Only)

Address \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

E-mail(s) \_\_\_\_\_ / \_\_\_\_\_

Cell Phone(s) (Optional) \_\_\_\_\_ / \_\_\_\_\_

**Corvette:** Year \_\_\_\_\_ Coupe \_\_\_\_\_ Convertible \_\_\_\_\_ Plate# \_\_\_\_\_ Color \_\_\_\_\_

2nd Corvette Year \_\_\_\_\_ Coupe \_\_\_\_\_ Convertible \_\_\_\_\_ Plate# \_\_\_\_\_ Color \_\_\_\_\_

3rd Corvette Year \_\_\_\_\_ Coupe \_\_\_\_\_ Convertible \_\_\_\_\_ Plate # \_\_\_\_\_ Color \_\_\_\_\_

**ACKNOWLEDGMENT OF RISK AND HOLD HARMLESS AGREEMENT**

I hereby acknowledge that I have voluntarily chosen to participate in the activities of the Cape Cod Corvette Club. I recognize that the activities involve risk of injury and I agree to accept any and all risks associated with them, including but not limited to property damage or loss, minor bodily injury, severe bodily injury, and death. Furthermore, I recognize that participation in the club activities involves activities and risks incidental thereto, including but not limited to, travel to and from meetings, club events, club cruises, club classes, club car shows, and the possible reckless conduct of other participants. I am voluntarily participating in the activities with the knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage, bodily injury, or death. In consideration of my participation in the activities and to the fullest extent permitted by law, I agree to indemnify, defend and hold the Cape Cod Corvette Club, its officers, directors, employees, agents, volunteers and assigns from and against all claims arising out of or resulting from my participation in the activities. "Claim" as used in this agreement means any financial loss, claim, suit, action, damage, or expense, including but not limited to attorney's fees, attributable to bodily injury, sickness, disease or death, or injury to or destruction of tangible property including loss of use resulting there from. In addition, I hereby voluntarily hold harmless the Cape Cod Corvette Club, its officers, directors, employees, agents, volunteers and assigns from any and all claims, both present and future, that may be made by me, my family, estate, heirs or assigns. I also understand that the Cape Cod Corvette Club does not provide any medical or dental insurance or life insurance to cover bodily injury, illness or death, nor insurance for personal property damage or loss, nor insurance for liability arising out of my negligent acts or omissions; and I acknowledge that I am completely responsible for my own insurance to cover these expenses. I further understand that this acknowledgment of risk and hold harmless is intended to be as broad and inclusive as permitted by the laws of the State of Massachusetts and that if any portion hereof is held invalid, I agree that the balance shall, notwithstanding, continue in full legal force and effect.

**I agree that this acknowledgment of risk and hold harmless is effective for as long as I am a member of the Cape Cod Corvette Club.**

\_\_\_\_\_  
Signature of Applicant /Printed Name/ Date

\_\_\_\_\_  
Signature of Spouse/Partner Printed Name/ Date