

Woodchuck Registration Form



Date _____

Name _____ E-mail _____
Address _____
Telephone _____ Web Site _____
Special skill or interest _____

Dues Paid 06,07,08,09,10,11,12,13,14,15,16,17

Please make check payable to WTNV.

Source of information about this organization. _____

Statement of liability release:

I, _____, in full recognition of the inherent danger of any form of woodworking, do hereby personally assume all risk of injury to myself or my property during any and all activities related to my membership in this woodworking organization. I further release and hold harmless any other person, whether a member of the organization or not, before during and after any class, demonstration or usual meeting activity, from all harm to me or my property.

I further attest that I am of lawful age and legally competent to sign this affirmation and release.

I further state that I am of sound mind and body and possess sufficient fitness to perform any woodworking activities associated with this membership in a safe manner. I personally take full responsibility for my fitness to perform these activities and simultaneously hold all others harmless if, for any reason, my fitness or lack thereof increases my risk of personal injury or property damage.

Signature _____ Witness _____