

Sandy Pines Membership Application

Site Number			Do you own another site?				
1. Legal Name							
First, Middle, & Last Name			First, Middle, & Last Name				
Maiden name			Maiden name				
Date of Birth			Date of Birth				
Driver's License #			Driver's License #				
Phone #			Phone #				
Email			Email				
Address			Address				
City, State, Zip							
Emergency Contact							
Name			Name				
Number							
Employment							
Employer Name			Employer Name				
Address							
Work #							
Occupation/Special Skill							
List Children's Names &							
Personal References							
Name	City		PI	hone #			
Name							
Purchase Price \$							
		,					
*Do you currently have	an Associate M	lember	or Grandchild mo	agnetic card? _	Yes_	No	
Have you, the co-appli			ate Members, or a	ny intended gu	ests be	en	
convicted of a felony?	YesN	0					
Have you, the co-appli	cant, intended	Associo	ate Members, or a	ny intended gu	ests be	en	
convicted of a felony th				•			
Offenders) Registration A	_			•	_		
Yes No	, :: ::::::::::::::::::::::::::::::::::	,	,			/	

I authorize all credit agencies, law enforcement/criminal justice agencies, city, state, county and federal courts, state motor vehicle bureaus and persons to release information that they have about me to Sandy Pines, or their agent. I release and hold harmless all parties involved from any and all liability for damages arising from requesting. Procuring or furnishing the requested information. I authorize Sandy Pines to receive any criminal history information pertaining to me in the files of any state or local criminal justice agency. I understand that approval for membership is not guaranteed, and is contingent upon the Board of Director's approval, based on the information contained in this application as well as any information gained from the background check.

WAIVER AND RELEASE

PLEASE READ CAREFULLY BEFORE SIGNING

For and in consideration of allowing our family to participate in activities at Sandy Pines, I hereby state and agree as follows: I do for myself, my child(ren), and our respective heirs, executors, and administrators, legal representatives and assigns hereby voluntarily release, discharge, waive and relinquish any claims or causes of action for personal injury or property damage, occurring to me and/or my child(ren) arising as a result of the use and/or enjoyment of Sandy Pines facilities and/or any activities incidental thereto, wherever and however such injuries may occur, which may hereafter arise for me or my child(ren). I agree that under no circumstances will I, my child(ren) or our respective heirs, executors, administrators, legal representatives and assigns prosecute or present any such claim against Sandy Pines, its officers, directors, employees, agents or assigns (the "Released Parties").

BY SIGNING THIS AGREEMENT, I, ON MY BEHALF AND ON BEHALF OF MY CHILD(REN), RELEASE THE RELEASED PARTIES FROM ANY CLAIM OR CAUSE OF ACTION I, OR MY CHILD(REN) MAY HAVE FOR PORSONAL INJURY OR PROPERTY DAMAGE ARISING FROM THE ABOVE-DESCRIBED ACTIVITIES. I AGREE TO INDEMNIFY ANY HOLD THE RELEASED PARTIES HARMLESS FOR ANY INJURY WHICH MAY OCCUR TO ME OR MY CHILD AT SANDY PINES.

This Agreement may not be modified orally and may not be waived in any respect. Every term and provision of this Agreement is intended to be severable. If any one or more of them is found to be unenforceable or invalid, that shall not affect the other terms and provisions, which shall remain binding and enforceable.

I give permission to Sandy Pines to use photographs or other images of myself and my family and my personal experiences for Sandy Pine's marketing, promotional and fundraising related activities. I understand that my personal information may appear in letters, brochures, websites, or other promotional materials used by Sandy Pines. I give Sandy Pines permission to share this information with its members and affiliates. There is no time limit associated with this permission and I am not seeking any compensation in return.

I HEREBY CERTIFY THAT THE INFORMATION I PROVIDED IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I HAVE READ THIS AGREEMENT CAREFULLY, UNDERSTAND IT, AND AGREE TO BE BOUND BY IT.

Signature		· · · · · · · · · · · · · · · · · · ·	 	Date			
Signature				Date			
Approved By				Date			
For Office Use Only							
Transfer	Resale	SP Sale	Condo	Trust			
Boat Registration_	yesno Boat	Stake/Dock #	Club Prophe	Dynamics			
Lienyesno	Lien Held By		Cardsne	wupdatedAMAG			
Background Chec	ck Complete	Pass Fo	ıil				