

NAMA: Membership Application Form

Primary Member

Name: _____

Phone: _____ Email: _____

Address _____

City / State / Zip: _____

Do you want your name and phone number to be added to the buddy list? Circle one: YES/NO

Secondary Member (Spouse/Partner)

Name: _____

Phone: _____ Email: _____

Emergency contact

Name: _____ Phone: _____

Club Interests (Check all that apply):

Detecting Prospecting Rock Hounding Club Outings Social Events & Meetings

CHECK ONE: _____ **NEW MEMBER \$45.00** _____ **Renewal \$40.00***

Please make checks payable to "NAMA" Mail to: NAMA, P.O. Box 612, Renton WA 98057

(Current NAMA members must renew their association membership no later than March 31st. Effective on April 1st all members who have not renewed their membership will no longer be considered a current NAMA member and, without exception, will be required to rejoin the association as a "NEW" member.)*

IMPORTANT...PLEASE READ THIS CAREFULLY: THIS REPRESENTS A RELEASE OF LIABILITY.

In and for the privilege of becoming a member and participating in any/all activities of the North American Mining Association, hereafter known as NAMA, I do realize and hereby acknowledge that by affixing my signature herein I am fully aware that any and all NAMA activities may involve certain known and unknown associated inherent dangers and that with my participation in these NAMA activities, that I may incur personal risk and possible danger to myself and others and that from my involvement with these activities I might incur personal injury to myself, and that the associated dangers of these activities include but are not limited to , accidents, drowning, illnesses, wounds and abrasions, broken bones, internal injuries, hypothermia and even death, and that these dangers are often found and injuries are incurred in remote areas where NAMA activities are conducted, and that often these areas are in locations without medical facilities or possible emergency assistance, and may result from the forces of nature or the actions of other participants and other persons. I acknowledge that I fully understand the above and am aware that in consideration for the right to join NAMA and to participate in its activities, I do hereby release NAMA, it's members, families and any associated sponsors, affiliates, or any other party (if any), from any and all liability, claims and/or causes of act arising out of, or connected in any way with my participation in any and all NAMA activities. And that by agreeing to become a member of NAMA and participating in its activities that I do agree that the terms of this agreement that shall serve as a release and indemnity agreement for my heirs, personal representatives, and for all my family including minors. I also certify that I am an adult and eighteen (18) years of age or older. And by affixing my signature that I have read this and do fully agree with the terms of this release and indemnity.

Signature: _____ Date: _____

Signature: _____ Date: _____

For Official Use:

Check# _____ Member #: _____ Date Processed: _____

Referred By: _____