

Member Name

SUN CITY WEST YOGA CLUB Member Registration Form

Annual Dues: \$10.00

Make check payable to SCW YOGA CLUB

Member Rec Card Number	
SCW Address	
Phone Number	
of this release, does herely oga Club, instructors, and ecreation Centers of Surficers, employees, agenor any and all liability for ustained by, accrued to, by the Sun City West Yoga pon Member's heirs, executed the activities and that the activities are cognizes that the activities are cognized to the surficers and that the activities are cognized to the surficers are cognized to the activities are cognized to the surficers are cognized to the surfice	mber of the Sun City West Yoga Club, by execution by release, waive and discharge the Sun City West d/or officers of the Sun City West Yoga Club, a City West, Arizona thereof, and any of their ts, representatives and successors and assigns or any damage, loss, injury, or death which may be or arise out of participation in an event sponsored a Club. This release and waiver shall be binding ecutors, representatives, and assigns. Member cies of the Sun City West Yoga Club are physically advice of a competent physician should be sought by or participation if there is any doubt as to dilities or condition.
☐ New Member	☐ Renewing Member
Member Signature	
Date	



Date

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The undersigned, as a Member of the Sun City West Yoga Club, by execution of this release, does hereby release, waive and discharge the Sun City West Yoga Club, instructors, and/or officers of the Sun City West Yoga Club, Recreation Centers of Sun City West, Arizona thereof, and any of their officers, employees, agents, representatives and successors and assigns from any and all liability for any damage, loss, injury, or death which may be sustained by, accrued to, or arise out of participation in an event sponsored by the Sun City West Yoga Club. This release and waiver shall be binding upon Member's heirs, executors, representatives, and assigns. Member recognizes that the activities of the Sun City West Yoga Club are physically demanding and that the advice of a competent physician should be sought and followed prior to entry or participation if there is any doubt as to Member's physical capabilities or condition.	
☐ New Membe	er
Member Signatur	<u>e</u>