美國加州排舞協會

California Line Dance Association of America MEMBER REGISTRATION FORM (One Form Per Person)

* Please print clearly 請填寫清楚		
, , , , , , , , , , , , , , , , , , , ,		Member Number:
姓名 English Name:		
Chinese Name (optional):	性別 Sex: M F	
地址 Address:		
		(由本會編排)
E-mail:	電話 Phone:	
Coach: Locat	tion:	
Please check the appropriate box below:		
🔄 Lifetime Membership Fee\$2,000.00 (\$3,000.00 with spouse)	
New Membership Fee \$255.00/Year	with 1 CLDAA T-shirt.	
Renewal Fee \$240.00/Year Due and payable on April 1 st of Each Year.		
🔄 \$20.00 Membership Card Replaceme	ent Fee	
Payment: Check (Check No:) Cash (Amount: _)

Hold Harmless and Indemnification Agreement

I, _________ hereby acknowledge that I voluntarily participate in the programs and activities conducted by California Line Dance Association of America. I understand and fully aware of the risks and hazards involved with the activities require physical exertion that may cause physical injury, and it is my responsibility to consult with a physician prior to and regarding my participation in all of the activities mentioned. I agree to assume full responsibility for any risks, injuries and/or any type of damages, known or unknown which I might incur as a result of participating in any and/or all activities and events with California Line Dance Association of America.

I knowingly, voluntarily and expressly agree to indemnify, defend, and hold harmless California Line Dance Association of America, its board of directors, agents, employees, and associates from and against any loss, expense, liability, damage, and claim, suit, or judgment arising from, or in connection with my successors, assigns, heirs, executors and administration, and any other person or entities who/which may have a claim based on my personal injury, including death, and/or property damage. I further agree that this hold harmless and indemnification shall apply to any and all facilities with the California Line Dance Association of America. Should any dispute arise which we are unable to resolve through negotiation or the use of third party mediation, the undersigned agree to submit to resolution by arbitration in accordance with the rules of the American Arbitration Association. IN AGREEING TO ARBITRATION, I ACKNOWLEDGE THAT IN THE EVENT OF A DISPUTE OVER FEES, EACH OF US IS GIVING UP THE RIGHT TO HAVE THE DISPUTE DECIDED IN A COURT OF LAW BEFORE ANY JUDGE OR JURY AND INSTEAD ARE ACCEPTING THE USE OF ARBITRATION FOR RESOLUTION. The prevailing party shall be entitled to the allowance of a reasonable attorney's fee and other costs of such action. Of the foregoing is in accordance with your understanding, please sign below in the space provided and return this letter to us at your earliest convenience.

I agree to pay \$10.00 when fail to present CLDAA Membership Card, and \$35 for Bounced Check surcharge.

I have read and fully understand the contents above, and I voluntarily agree to the terms and conditions:

Applicant's signature

Date_