

Membership Renewal

Please print clearly

Name:				
Address:				
City:	State:	Zip:		
Phone:	_Email:			
If family membership (family	members livi	ng in the same	household)	
Name:	Email			
Annual Membership Renewal \$25.00 Individual \$40.00 Family (living in \$15.00 Full-time Studen	the same ho	ousehold)		
Please make checks payable Mail check to: TACC Treasur				
	Rele	ease of Liabi	ility	
	ling death, damages	s, property damage, or l	nera Club events, I recognize the risk and acknowledge th loss which I may sustain as a result of participating in any	
			y have for injuries or damages, as a result of participating ts officers, agents, servants, employees, volunteers, and	in the
volunteers and affiliates from any and all clain	ns for injuries, includering for the Travers	ding death, damages, pr	Camera Club and its officers, agents, servants, employees property damage, or loss which may have or may in future agree that the Traverse Area Camera Club is not liable fo	accr
	from injuries, inclu	ding death, damages, p	amera Club and its agents, servants, employees, voluntee property damage, or loss sustained by me and arising out ies or equipment.	
to be used for the purpose of supporting the g sponsors, and organizers. I agree to allow the	oals of the Club's C Traverse Area Cam Club's Constitution,	onstitution, by the Trave nera Club and its event I any images that I subm	ographed. I agree to allow photo, video, or film likenesses of verse Area Camera Club and its event holders, producers, t holders, producers, sponsors to use and display in any m mit to events. This release and grant is effective as of this	nedia
Signature:			Date:	

Family Signatures:____