

Cameron Highlanders of the Northwest
Application for Membership* – Year _____

Name _____ DOB _____
Last first middle initial

Address _____

City _____ State _____ Zip Code _____

Primary Phone _____ Secondary Phone _____

Email Address _____

Please print legibly

If under 18

Parents/Guardian _____

Name(s) Relationship(s) Phone Number(s)

Health Insurance _____ Blood Type _____

Company Group Number Member Number

Drivers Auto

License _____ Insurance _____

State DL Number Company Policy Number

School/ Major/

Employer _____ Occupation _____

The Cameron Highlanders of the Northwest (CHN) is a 501c (3) Non-Profit youth and community service organization. We operate solely on donations from our members and outside supporters. We ask every adult member 18 or over to make a minimum donation annually of \$25.00. If you can afford to donate more, we would be most appreciative of your support. The donation is tax deductible and we can provide our EIN number and a receipt if requested. Your donation should be made when turning in this application. Please check off the appropriate box below indicating your donation amount and thank you for supporting The Cameron Highlanders of the Northwest!

[] \$25 [] \$50 [] \$75 [] \$100 [] Other \$ _____

***The Cameron Highlanders of the Northwest shall have no members, at that term is defined by Oregon Revised Statutes, Chapter 65, but shall have members for other purposes. These members shall have none of the rights or duties described in ORS Chapter 65 (or any corresponding future statute)**

PLEASE COMPLETE BACK SIDE OF FORM

Cameron Highlanders of the Northwest Adult/Minor Release of Liability

I, _____, Parent or Legal Guardian of
name of Parent / Guardian if member is under 18

I, _____,
name of member

1. Understand that many of the activities that the Cameron Highlanders of the Northwest participate in contain some risks. Civil War reenacting involves the use of black powder weapons and is physically and mentally demanding. Other activities such as camping, orienteering, white water rafting, skydiving, woodcutting, and transportation to and from such activities all contain risks and are physically demanding, and that the activities of the Cameron Highlanders of the Northwest may include, but are not limited to, the previously listed activities.

2. **Do hereby Release** the Cameron Highlanders of the Northwest, it's Board of Directors, it's Members, owners of property that the Cameron Highlanders of the Northwest hold activities on, and vendors associated with those activities, from any and all liability and or financial responsibility in the event that I and or my family members may be harmed or injured, or suffer financial or personal property loss, while participating with the Cameron Highlanders of the Northwest.

3. Understand that illness and injuries may occur, and that in the event my child is ill or injured;

a. Illness and injuries are treated as soon as possible _____
please chose only a. or b. parent / legal guardian signature

b. An attempt to contact me is made before treatment _____
parent / legal guardian signature

c. I authorize the Cameron Highlanders of the Northwest to give my child over the counter medications except for the following medication(s) _____

parent or legal guardian signature

I agree to the three (3) conditions of this Liability Release

Signed _____ Printed _____ Date _____
parent / legal guardian if Member is under 18

Signed _____ Printed _____ Date _____
Member