

Greater Charleston Ski Club

Membership Application 2024

c/o S. Chadwick, 154 Revolution Dr., Mt. Pleasant, SC 29464

NAME	DOB
ADDRESS	
YOUR E-MAIL	CELL#
NAME OF SPOUSE	DOB
SPOUSE'S E-MAIL	CELL#
How did you hear about us?	
Would you like to help with club activitie	s?
Intermediate Advanced Expert	THE MEMBERSHIP YEAR RUNS APRIL 1 – MARCH 31 MBERSHIP FEE PER ADULT (AGE 21 AND ABOVE) \$20.00 ANNUALLY \$ENCLOSED WITH APPLICATION FOR# OF ADULTS mpleted, legible and accompanied by signatures to be considered valid for acceptance
safety and the enjoyment of all, member of Directors if they are not acting in the b	
Club, Inc., its officers, directors and each	EEMENT: any and all liability claims or demands against the Greater Charleston Ski and every member thereof, which may arise out of or be related to any or to any member of my family by such club membership and participation in
Applicant's Signature (REQUIRED):	DATE
Spouse's Signature (REQUIRED if dual mer	nbership):
	DATE
Club Member Reference (If any):	