



Z Club of San Diego

Membership Form



Active Full Member Renewal \$36.00 _____
 Military/Student Full Membership \$21.00 _____
 Associate Member Renewal \$21.00 _____

Membership renewals are due in March. Please, return this form along with your payment.

Indicate level of membership, sign and return this form with check payable to:

*Thank you,
 Chuck Golden
 Membership Coordinator
 760-443-5625*

Z Club of San Diego
 P.O. Box 710886
 Santee, CA 92072-0886

Member Number	<i>If known for renewal</i>		
First Name	Last Name	Nick Name	Birth Date MM/DD
SO First Name	SO Last Name	SO Nick Name	SO Birth Date MM/DD
Street Address	City	State	Zip Code Phone
E-Mail Address		SO Email Address	
Z Car #1 Year/Model/Color	Z Car #2 Year/Model/Color	Z Car #3 Year/Model/Color	

Waiver and Release from Liability

This form limits Z Club of San Diego's liability. Read it thoroughly and sign below.

As a Member of the Z Club of San Diego (ZCSD), I am solely responsible for any damage or injury to third parties, or myself resulting from anything connected with ZCSD Events/Activities. I agree to fully indemnify and hold ZCSD, its officers and representatives harmless for or in any claim, loss, damage, injury or liability which may be asserted against them by me or by any third party as a result of my activity. The foregoing covenants of exculpation and indemnity are intended to be and are complete, general and without restriction and include but are not limited to negligence (active or passive) or willful, reckless or wanton activity. I further agree that my car will be operated by a licensed driver and that the driver will comply with all applicable provisions of the California Vehicle Code. I further warrant that I carry automobile liability insurance on the vehicle, meeting or exceeding all California statutory requirements and that this insurance will be in force and effect for all ZCSD Events/Activities in which I participate. I will not participate in any Event/Activity under the influence of any alcoholic beverages or other drug or drugs that would impair my ability to perform at ZCSD Events/Activities. This release will be active for all ZCSD Events/Activities in which I participate.

 Member

 Spouse(Significant Other)

 Date