



# AMERICAN CANOE ASSOCIATION MEMBERSHIP FORM

All participants in ACA-insured activities must be ACA members in one of the following categories (choose one):

I am currently an ACA member. My member number appears below.

(Check here if renewing with this form )

1-year ACA Membership for:  
Individual \$40 | Family \$60 (2 adults+minors)   
(circle one)

1-year ACA Paddle America Club Membership for:  
Individual \$30 | Family (2 adults + minors) \$40   
(circle one)

ACA Introductory Membership for \$15  
(6 month membership with benefits, including a  
*Rapid Media* magazine)

I would like a 1-year Senior (62+) or  
Student Membership for \$25 (under 18, or  
under 23 with copy of student ID)

1-year Racing Athletes, Families, Coaches & Officials  
Membership for: Racing Individual \$55 | Racing Family  
(2 adults + minors) \$75 | Racing Junior \$25 (circle one)

I would like an ACA Event Membership for \$5  
(one activity membership, no member benefits)

As a new or renewing ACA member, my *Rapid Media* magazine choice is:

Print

or Digital

*Paddling Magazine*

*Kayak Angler*

## AMERICAN CANOE ASSOCIATION ADULT WAIVER & RELEASE OF LIABILITY/READ BEFORE SIGNING

IN CONSIDERATION of being permitted to participate in any way in the American Canoe Association, Inc. sports and recreation program and related activities ("Activities") I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of paddlesports and related activities and that I have adequate insurance to cover any injuries or damages I may suffer, that I am qualified, in good health, and in proper physical condition to participate in such activity, and that I willingly agree to comply with the stated and customary terms and conditions of participation. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. If I decide to leave early and not complete the Activity as planned, I assume all risks inherent in my decision to leave.

2. FULLY UNDERSTAND that: (a) paddlesports and related ACTIVITIES (including the use of equipment provided by RELEASEES) INVOLVE RISKS AND DANGERS OF DAMAGE TO PERSONAL PROPERTY AND SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the American Canoe Association, Inc., its Paddle America Clubs, affiliated clubs and organizational affiliates, their respective ACA certified instructors, certified instructor trainers, and certified instructor trainer educators, administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, or agents, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, INJURIES, DAMAGE TO PROPERTY, OR OTHER DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the RELEASEES, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

4. ACKNOWLEDGE, agree that any personal property belonging to me stored at facilities of the RELEASEES or transported by RELEASEES is done so at my own risk.

5. GRANT TO RELEASEES the right to use photos of me for publication.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Name (print) \_\_\_\_\_ Date of Birth \_\_\_\_\_

ACA # (if any) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Date \_\_\_\_\_ Adult Signature \_\_\_\_\_

Name / Date of Activity/Event \_\_\_\_\_

Sponsoring Club /Organization \_\_\_\_\_

State of California - Natural Resources Agency  
DEPARTMENT OF PARKS AND RECREATION

## VISUAL MEDIA CONSENT

### PRIVACY RIGHTS AND USE OF INFORMATION

*I give the State of California, Department of Parks and Recreation (DPR) permission to make photographs, videotapes, films or other likenesses of me, my child or legal ward. I hereby grant to DPR the unrestricted right to copyright any of the above-mentioned materials containing images of me, as well as the unrestricted right to use and reuse them, with their caption information, in whole or in part, in any manner, for any purpose and in any medium now known or hereinafter invented, in perpetuity, and in all languages throughout the world. These rights include, but are not limited to, the right to publish, copy, distribute, alter, license and publicly display these materials and images for editorial, trade, marketing and/or advertising purposes. I also grant to DPR and its licensees the unrestricted right to use and disclose my name in connection with use of the above materials.*

*I understand and agree that I will not be paid for any use described above.*

*I also waive, and release and discharge the State of California, DPR, its officers, employees and/or agents from, any and all claims arising out of or in connection with any use of the materials, caption information and images described above, including any and all claims for libel, defamation and/or invasion of privacy or publicity. I have read this release before signing below and I fully understand the contents, meaning, and impact of this release. I realize I cannot withdraw my consent after I sign this form and I realize this form is binding on me and my heirs, legal representatives and assigns.*

NAME OF SUBJECT(S) DEPICTED IN VISUAL MEDIA *(print)*

***By signing this form I hereby certify that I am the subject and/or parent or legal guardian of the person(s) under 18 years of age named above and I hereby sign this consent form on behalf of myself and/or such person(s) in accordance with the statements above.***

SIGNATURE OF SUBJECT AND/OR PARENT/LEGAL GUARDIAN ▶	PRINTED NAME	PHONE NUMBER (     )
ADDRESS	CITY/STATE/ZIP CODE	E-MAIL ADDRESS

### FOR DEPARTMENT USE ONLY

PARK UNIT AND/OR LOCATION WHERE VISUAL MEDIA CAPTURED <i>(print)</i>	UNIT NO.
PHOTOGRAPHER'S NAME AND TITLE <i>(print)</i>	DATE VISUAL MEDIA CREATED

IMAGE NUMBERS
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