

OLD PUEBLO LAPIDARY CLUB MEMBERSHIP FORM

(Rates Effective Jan 2019)

Date _____

Name (First/last): _____ Name First/last): _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Phone: (____) _____

New Members:

APPLIES TO NEW MEMBERS ONLY

	<u>Jan - Mar</u>	<u>Apr - Jun</u>	<u>Jul - Sep</u>	<u>Oct - Dec</u>
Single	\$30.00	\$23.00	\$16.00	\$11.00
Couple	\$40.00	\$30.00	\$23.00	\$16.00
Juniors	\$14.50	\$11.00	\$9.00	\$6.00

PRIOR MEMBERS
RENEWING
 \$25.00
 \$30.00
 \$12.00

Make check out to OPLC and mail to: Old Pueblo Lapidary Club
 Attn: Membership Chairperson
 3118 N. Dale Avenue
 Tucson, AZ 85712

OPLC Volunteer Opportunities:

OPLC cannot function without volunteers. Please check the appropriate box(es) indicating areas in which you are willing to help. Your volunteer assistance is necessary to the running of a successful organization. We can function only through volunteers.

- | | | |
|---|--|---|
| <input type="checkbox"/> Officer | <input type="checkbox"/> Club Historian | <input type="checkbox"/> Librarian |
| <input type="checkbox"/> Board Member | <input type="checkbox"/> Field Trips (Sponsor) | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Hospitality at meetings | <input type="checkbox"/> Newsletter Contributor |
| <input type="checkbox"/> Buildings, Grounds, Eqpt | <input type="checkbox"/> Junior Education | <input type="checkbox"/> Silent Auction |
| <input type="checkbox"/> Class Instructor | <input type="checkbox"/> Kitchen | <input type="checkbox"/> Share expertise |
| <input type="checkbox"/> Programs (speakers) | <input type="checkbox"/> Lab/workshop Monitor | <input type="checkbox"/> Other _____ |

Show Volunteer Opportunities:

Hobnob (early February)

Setup Takedown

Tucson Gem and Mineral Show (early February)

Setup Cab/Faceting demos Manning booth Takedown

Pima County Fair (April)

Setup Cab/Faceting demos Manning booth Takedown

Tell us about yourself: Lapidary interests, other clubs, positions held, other interests: (Also, where did you hear about our club?)

Note: Please also fill out page 2 of form....



Rocky Rockhound

OPLC Member Liability Waiver Statement

Consent to Treatment/Limitation and Waiver of Liability .

I verify/certify that I, (we) _____
(insert member name(s) here am physically and mentally able to participate in the lapidary activities at the Old Pueblo Lapidary Club (OPLC) and that I have been made aware all hazards which might relate to these activities. In the event of injury or accident, I hereby authorize the OPLC Monitors, Directors, Board members and/or other members to obtain and authorize any emergency medical treatment necessary for me. I acknowledge that lapidary work is potentially dangerous and in which injuries may occur in the normal course of pursuit of this hobby and I waive and release the OPLC its employees, agents, officers, Board members and members from any liability for injuries (including death) to myself arising from my participation in these activities. I further agree to assume all costs related to emergency medical treatment for myself which OPLC its employees, agents, Officers, Board members and staff may require and I authorize the disclosure of any medical information to my insurance carrier for the purposes of making claims for reimbursement. I also agree that all of the above mentioned members are not responsible for any lost or stolen items (including money, equipment, specimens, gems, jewelry, metals or other personnel belongings) before, during or after the lapidary activities at the OPLC facility.

In consideration of my lapidary activities, I do hereby for and on behalf of myself and my heirs and legal representatives release and forever discharge in the OPLC its employees, agents, officers, Board members and members and their successors and assigns, of and from any and all claims and demands of every kind, nature, and character which I may have or hereafter acquire for any and all damages, losses or injuries which may be suffered or sustained by me in connection with my activities from which such remissions is granted and any period traveling to or from the OPLC events at the Club or any other OPLC facility or activity associated with OPLC and all such claims are hereby waived and released and I covenant not to sue therefor.

Member's Signature _____ *Date* _____

Member's Signature _____ *Date* _____

Member's Telephone Number: _____

Member's Emergency Contact Name: _____

Member's Emergency Contact Number: _____