

**RTP CORVETTES
MEMBERSHIP APPLICATION
P. O. BOX 90353
RALEIGH, NC 27675-0353**

NAME:	
ADDRESS:	
CITY:	
STATE:	
ZIP:	
EMAIL:	
YEAR:	
COLOR:	
BODY STYLE:	
MEETINGS ATTENDED:	
PHONE:	
ALT PHONE:	
NAME OF REFERENCE:	

The members and board of RTP Corvettes Welcomes you to our club. Please feel welcome and know that you are a part of our family. Please let us know about yourself and include any information of what you can bring to the club and activities that we participate in or new ideas that you think would be beneficial to our membership.

Signature:		Date:	
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MEMBERSHIP AND FEE SCHEDULE AS OF 1 JANUARY, 2006	
ONE TIME INITIATION FEES:	\$10.00
ANNUAL MEMBERSHIP DUES:	\$50.00
SPOUSE MEMBERSHIP DUES:	\$10.00

RTP CORVETTES

GENERAL RELEASE AND INDEMNIFICATION FORM

THIS IS A DISCLAIMER RELEASE-READ BEFORE SIGNING!

I agree that RTP Corvettes and their respective officers, employees and agents (hereinafter referred as "Released Parties") shall not be liable or responsible for injury to me (including paralysis or death) or damage to my property occurring during any RTP Corvettes activity, function, social event or combined event with any other organization and resulting from acts or omissions occurring during the performance of the duties of the Released Parties, even where the danger or injury is caused by negligence (except willful neglect). I understand and agree that all RTP Corvettes members, and their guests and family participate voluntarily and at their own risk in all activities and I assume all risks of injury and damage arising out of the conduct of such activities. I release and hold the "Released Parties" harmless from any injury or loss to my person or property, which may result from my participation in any RTP Corvette activities and/or event. I UNDERSTAND THAT THIS MEANS THAT I AGREE NOT TO SUE THE "RELEASED PARTIES" FOR ANY INJURY OR RESULTING DAMAGE TO MYSELF OR MY PROPERTY ARISING FROM, OR IN CONNECTION WITH, THE PERFORMANCE OF THEIR CHAPTER DUTIES IN SPONSORING, PLANNING OR CONDUCTING OF ANY SAID EVENT.

WAIVER OF RIGHTS UNDER STATE STATUTES

I further agree to waive all benefits flowing from any state that would negate or limit the scope of the Release and Indemnification Agreement including, but not limited to the North Carolina Civil Code that provides: "A general release does not extend to the claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known to him must have materially affected his settlement with the debtor."

By signing the Release, I certify that I have read this release and fully understand it and that I am not relying on any statements or representations made by the "Released Parties."

SIGNATURE: _____

DATE: _____

PRINTED NAME: _____

WITNESS: _____

DATE: _____

PRINTED NAME: _____