

Send a completed hardcopy form and payment to:

CRLC Membership Director

#13, 3650 - 19<sup>th</sup> Street NE

Calgary, AB T2E 6V2

<input type="checkbox"/> New
<input type="checkbox"/> Renewal

## CALGARY ROCK AND LAPIDARY CLUB <crlc.ca> MEMBERSHIP APPLICATION

Adult Single  
(18-64)  
\$35

Adult Couple  
(18-64)  
\$45

Single Adult w/  
Single Child  
\$45

Senior Single  
(65+)  
\$30

Senior Couple  
(65+)  
\$35

Family - \$60  
Inc, 2 adults +  
Pebble Pups  
& Juniors

**Membership Payment must accompany application and is due Jan 1st for the next calendar year.**

**NAME (S)**

**AGE or 18+**

Pebble Pups Under 14 and Juniors 14 — 17 must be accompanied by an adult member

**ADDRESS**

**CITY**

**POSTAL CODE**

**PHONE #**

**EMAIL**

Name Tag: \$5 EACH (Optional to membership)

Please print name as you would like to appear on the name tag(s)

**Prepaid Studio Drop-in Sessions:** Due annually and prorated monthly to December 31. (\*Optional\*)

(Optional to membership, Studio Drop-in Sessions may be attended individually for a fee of \$6 each session)

**SINGLE - \$144**

**COUPLE - \$180**

**FAMILY - \$216**

If accepted as a member of the Calgary Rock and Lapidary Club, I commit to abide by sign-in sheets where needed, rules and regulations for classes and shop use, and the By-Laws of the Club published at 'crlc.ca', I will share knowledge and volunteer as able. I hereby apply for membership in the Calgary Rock and Lapidary Club.

**(Signature of Applicant)**

**Date**

Consent Statement: we require the above information to ensure that our membership list is current and to send you information about our programs and activities as well as renewal notices, This list is for the sole use of the Club Executive and Board of Directors to administer Club activities, The Calgary Rock and Lapidary Club does not sell, barter or lease membership information. If you have any questions or concerns regarding how the Club uses personal information collected from its members, please contact the Membership Director.

**Dues Received By:**

**Total Amount:**

**Paid by:** cash/cheque/paypal/e-transfer/square

**Please read and sign waiver on the back —>**

(CRLC use only) Application for membership accepted on:

Template version 2018.11.08 SG, Amended 2019.10.15 SG, Amended 2022.04.24 AL, Amended 2023.01.13 AL, Amended 2025.04.12

# **WORKSHOP INFORMED CONSENT OF RISK AWARENESS RELEASE, AND WAIVER OF LIABILITY; ASSUMPTION OF RISK; COVENANT NOT TO SUE FORM**

Date 2016/03/03

## **CAUTION: DO NOT SIGN WITHOUT READING**

To enable the Calgary Rock and Lapidary Club (CRLC) to continue to offer activities and encourage the members' participation, a certain level of protection is needed.

In consideration of permission to work in the CRLC Lapidary Workshop, for myself and my heirs, successors and assigns I hereby agree and acknowledge, each numbered paragraph, to indicate:

1. I have voluntarily applied for permission to work in the CRLC Workshop.
2. I acknowledge that for my own protection I should consult my physician before beginning to work in the CRLC Workshop.
3. I declare that I am fully aware that the premises used for the CRLC Workshop may be inherently dangerous for that purpose, or related uses, and that as a result of working in the lapidary shop, I could be injured, or die.
4. With full knowledge of these dangers, I nevertheless wish to work in the aforesaid CRLC Workshop.
5. I hereby assume all risk of bodily injury, death or property damage due to the active or passive negligence of CRLC, its agents, its volunteers or its employees, for claims based upon strict or vicarious liability arising from permission to work in the aforesaid CRLC Workshop.
6. In exchange for, and in consideration of, being permitted to work in the aforesaid CRLC Workshop, I hereby release, waive, and discharge CRLC, its agents, volunteers, and/or its employees, from any and all liability to me and/or my family, heirs, and assigns, as a result of any injury or death arising from working in the workshop, even if the said injury was caused by the passive or active negligence of CRLC. For myself, and my heirs, successors and assigns, I also covenant not to sue the said persons or entities for any claim arising from such injury or death.
7. If any portion of this agreement is adjudicated unenforceable, said portion shall be severed and the remaining portion shall remain in full force and effect.
8. I acknowledge that I have been offered an opportunity to have this agreement reviewed by my attorney and I have satisfied myself that I understand the agreement and wish to execute it. I acknowledge that if any action is brought in which this agreement is offered as a defense, or for the purpose of interpreting this agreement and declaring rights and obligations there under, that the prevailing party shall be entitled to reasonable attorney fees and costs.
9. I have read and understood this agreement. I agree that no oral representations, statements, or inducements apart from the foregoing have been made to persuade me to sign this agreement.
10. I understand that by signing below, I release and hold harmless CRLC, its employees, volunteers and agents from any liability or claim for damages if I am injured as a result of working in the CRLC Workshop.
11. I hereby acknowledge that the CRLC shall not be responsible to insure any claim, or loss of my personal belongings, or to be responsible for any damages, claims, or liabilities, and hereby acknowledge that I have been advised to obtain insurance to cover such activities and agree to indemnify and defend CRLC and hold CRLC harmless for any claims, damages, liabilities or causes of actions, whether known or unknown, in connection with the CRLC Workshop.

If a member is a Junior Member (under 18 years of age) we require one of the member's parents or guardian co-signs the application.

### **Calgary Rock and Lapidary Club (CRLC)**

\_\_\_\_\_  
Member Signature \_\_\_\_\_ / \_\_\_\_\_  
Member Printed Name \_\_\_\_\_ / \_\_\_\_\_  
Date

\_\_\_\_\_  
Member Phone \_\_\_\_\_ / \_\_\_\_\_  
Member e-Mail Address \_\_\_\_\_ / \_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature \_\_\_\_\_ / \_\_\_\_\_  
Witness Printed Name \_\_\_\_\_ / \_\_\_\_\_  
Date