

Membership Application / Renewal Form



Club HP SoCal with Release and Waiver of Liability



PLEASE PRINT OR TYPE INFORMATION

Name: _____ Nickname: _____
Last First Middle

Address: _____
Street Apt/Space #
City State Zip Code

Mobile Telephone #: _____ Land Phone#: _____ Preferred Contact Method: Land Mobile

Spouse's/Partner's Name: _____
Last First Middle Initial

Are you still working (helpful for planning events)? Yes No

My spouse is also applying for membership.

(Spouse must submit a separate application, but only one applicant need make payment.)

E-mail Address: _____

Date Hired (month/yr) : _____ Date HP employment ended or current years of HP service: _____

HP site where last employed: _____ Div #: _____
Optional

Please tell us how you found out about Club HP SoCal: _____

Last Name

PREFERENCES

The Club HP SoCal newsletter is sent by email, to conserve costs and the environment. If you are unable to receive email and require a printed copy via postal mail, please write to the Club Membership Chair at the address below.

The Club HP SoCal membership roster is provided to current Club members in a secure area of the Club website (password required). Your name/address/ phone number/email will be published unless you indicate a preference to withhold your personal information. You may change your preference at any time by contacting the Club membership chairperson.

Please do not publish my address/phone number/email. I understand my name will still be included.

BYLAWS (Note: Club HP SoCal is legally known as HPRCSC Inc.)

A copy of the BYLAWS governing HPRCSC, Inc. and other important club information may be obtained by writing to the Club Secretary at the address below or by accessing the Club website at: www.clubhpsocal.org

My signature below affirms that I have read and reviewed the Articles, Bylaws, and Rules of the Hewlett-Packard Retirees Club of Southern California, Inc. and I agree to be bound thereby.

RELEASE AND WAIVER OF RESPONSIBILITY

The second page of this application consists of the Release and Waiver of Liability. Your application is **NOT** complete without this page. Please turn to the next page, read the release, and indicate your acceptance with your signature.

DUES & FEES

The annual membership fee is \$25.00 per year. If both parties of a couple are each members of the Club (both have 10 years or more of service at HP), then only one membership payment is due. Membership renewal begins on November 1 for the following calendar year and the membership fee is considered delinquent if not received by December 31. There is a \$5 surcharge for dues submitted after Dec. 31, and until payment is received, membership benefits are revoked.

ENCLOSED IS MY MEMBERSHIP PAYMENT OF \$25.00.

X _____
Applicant's Signature

Date

Did you sign the liability waiver on the reverse side?

Membership Application

Check # _____

Date

Received: ____/____/____

If planning to pay by check, please send an email to ClubHPSocal@gmail.com with the title "Check". The mailing address will be sent back to you. Make checks payable to **Club HP SoCal** and mail to the returned address, **WITH** this completed **APPLICATION** and the **LIABILITY WAIVER**.



Club HP SoCal

(Hewlett Packard Retirement Club of Southern California)



Release and Waiver of Liability

This Release and Waiver of Liability (the “Waiver”) is given to the Hewlett-Packard Retirees Club of Southern California (the “Organization”) in consideration of the acceptance of my application for membership in, maintenance of membership in, and participation in any activity conducted by or on behalf of the Organization (“Organization Activity”). I have read, understand, and willingly sign this Waiver. This Waiver applies not only to me but also to my spouse, partner, or significant other, and anyone else I invite to participate in an Organization Activity (“My Invitees”). But for this Waiver, the Organization would not allow participation in an Organization Activity. I acknowledge that participation in an Organization Activity may have certain inherent risks, including serious injury or death, which I and My Invitees voluntarily assume. I and My Invitees agree to follow any instructions given or rules established by the Organization or its directors, officers, activity organizers, or agents (“Organization Representatives”) with regard to participation in any Organization Activity. I have read the Articles, Bylaws, and rules of the Organization and I agree to be bound thereby.

I and My Invitees hereby indemnify, release, hold harmless and forever discharge the Organization and all Organization Representatives of and from any and all claims, demands, debts, expenses, causes of action, lawsuits, damages, injuries, or liabilities, of every kind and nature, whether known or unknown, in law or equity, arising from or in any way related to participation in any Organization Activity. This Waiver does not apply to any act of gross negligence, or intentional, willful or wanton misconduct. This Waiver is binding upon me, My Invitees, and my heirs, executors, legal representatives, successors and assigns.

This Waiver is governed by the laws of the State of California and is intended to be as broad and inclusive as is permitted by those laws. If any provision of this Waiver is held invalid or unenforceable by a court of competent jurisdiction, the remaining provisions will continue to be fully effective. This Waiver contains the entire agreement between me and the Organization concerning the subject matter of this Waiver, and supersedes any separate written or oral communications concerning such subject matter. This Waiver may not be waived, altered, amended or repealed, in whole or in part, except upon the prior written consent of me and the Organization.