

**OMAHA SKI CLUB MEMBERSHIP APPLICATION
JUNE 2024 – MAY 2025**

MEMBERSHIP STATUS: NEW ____ RENEWAL ____

FAMILY \$25____ (\$30 if paid after September 30, 2024)

SINGLE \$22____ (\$27 if paid after September 30, 2024)

MEMBER INFORMATION - - - PLEASE PRINT CLEARLY

Name: _____ Spouse: _____

Street Address: _____ City: _____ State: ____ Zip: _____

Home Phone: (____) _____ Alternate Phone: (____) _____

Email Address: _____

Check this box if you are 21 years or older. For family membership, list all dependent minors on back of application.

If new member, how did you hear about the club? _____

Ski/Snowboard destinations you're interested in: _____

Activities you're interested in: Biking____ Bowling____ Dinners____ Other____
(please list)

Other Interests: (please list) _____

NOTE: BY SIGNING THIS APPLICATION I RELIEVE THE OMAHA SKI CLUB, INC. (OSC) OF ANY RESPONSIBILITY FOR ACCIDENT OR INJURY I INCUR WHILE PARTICIPATING IN ANY OSC ACTIVITIES. I ALSO CERTIFY THAT I AM OF LEGAL DRINKING AGE IN THE STATE OF NEBRASKA.

SIGNATURE _____ **DATE** _____
(Must be signed and dated)

[OSC USE ONLY] MEMBERSHIP NO. _____ BD. _____ TR. _____ NL. _____

Mail to: Omaha Ski Club, P.O. Box 3104, Omaha, NE 68103-0104

