



Quail Creek Fine Arts Painting Club (QCFAPC) Membership / Waiver & Release Agreement

Membership dues are \$25 individual/\$35 family per year. **A separate membership form with signed waivers is required for EACH family member on an annual basis.** If you join between October 1 and December 31, dues are valid from the date paid through the following year.

Please make check payable to QCFAPC.

PLEASE CHECK ONE BOX BELOW: This membership is for Individual _____ Family _____

- ☐ New Membership
- ☐ Membership Renewal for _____ Changes to contact info on file? Yes _____ No _____
(year)
- ☐ Non-Member Taking Class _____ (\$40 club fee payable to QCFAPC)
(Name of Class)
- ☐ Guest of Member Observing Class _____
(Name of club member)
- ☐ Other _____ (Please explain)

Name (Please print): _____

Quail Creek Address: _____

Email: _____ Phone: _____

POA Waiver and Release Agreement

The undersigned desires to use the equipment and facilities provided by the Creative Arts and Technology Center (CATC). By executing this Waiver and Release, the undersigned hereby acknowledges and agrees that the undersigned is solely responsible for his/her actions while using the CATC; neither the Robson nor QCFAPC board members, monitors, or instructors are responsible for the undersigned's actions or safety while engaging in activities at the CATC.

The undersigned hereby releases and agrees to release all the foregoing parties from any claims, liabilities, actions, damages, costs, and expenses that arise because of, or related in any way to, the undersigned's use of the CATC and its facilities and equipment, and during participation in QCFAPC field trips outside the CATC.

In addition, the undersigned agrees to abide by all bylaws, policies and procedures, and accepted practices of the QCFAPC.

SIGNATURE: _____ DATE: _____

Deliver completed and signed form with payment (payable to QCFAPC) to the Fine Arts Studio, Room #103, in the CATC during Fine Arts Studio hours. Visit www.QCFAPC.com

----- **For QCFAPC Use Only. Do Not Write Below** -----

Date Paid: _____ Cash or Check #: _____ Membership Coord Initial: _____

Roster: _____ Email: _____ \$ to Treasurer: _____