

LAGUNA WOODS VILLAGE LIGHT VOLLEYBALL CLUB

MEMBERSHIPFORM

NAME _____

MANOR NUMBER _____ PHONE# _____

EMAIL ADDRESS _____

DUES \$10/year or \$100/life time PER MEMBER

CASH OR CHECK

- MAKE CHECK PAYABLE TO LWVLC

WAIVER AND COMMITMENT

By signing this form I certify that I am a resident or resident guest of Laguna Woods Village. I understand that LWV Light Volleyball Club is an all-volunteer sports club established solely for the enjoyment of fitness and social activities by its members. I will take responsibility for my personal conduct. I understand that any inappropriate behavior will not be tolerated, and that the Club reserves the right to revoke my membership. I will hold harmless any member, Club Board, LWV administration for any accident, injury, loss, or damage to me in the course of any activity sponsored by LWV Light Volleyball Club.

Signature _____ Date _____