



# USA Racquetball

## Membership Application



### Step 1: Check one

Address Change Only  
  Name Change  
  New  
  Renewing Member #: \_\_\_\_\_  
(if known)

### Step 2: Membership Options

- |  |   |
|--|---|
| <input type="checkbox"/> Auto-Renewal Adult (1 Year) _____ \$60          | <input type="checkbox"/> Lifetime _____ \$1,250                     |
| <input type="checkbox"/> Adult (1 Year) _____ \$65                       | <input type="checkbox"/> Lifetime 65+ _____ \$750                   |
| <input type="checkbox"/> Junior (1 Year) _____ \$30                      | <input type="checkbox"/> WOR (1 Year) _____ \$18.50                 |
| <input type="checkbox"/> Collegiate (1 Year) _____ \$30                  | <input type="checkbox"/> Team USA Challenge Donation _____ \$ _____ |
| <input type="checkbox"/> Limited Event Membership (1 weekend) _____ \$25 | <b>TOTAL</b> _____ \$ _____   |

A portion of your membership will go to your local state association to promote racquetball at the grassroots level.

Please Write Legibly (all information required)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Country: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Day Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Evening Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Birth Date (mm/dd/yyyy): \_\_\_\_/\_\_\_\_/\_\_\_\_

Email (for confirmation): \_\_\_\_\_

**AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY – In consideration of being allowed to participate in any USA Racquetball athletic/sports programs, and related events and activities, the undersigned – 1. Agree that prior to participating, they will inspect the facilities and equipment to be used, and if they believe anything is unsafe, they will immediately advise their coach, supervisor, or USAR personnel of such condition(s) and refuse to participate. - 2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions of negligence but the actions, inaction or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time. – 3. Assume all the forgoing risks and accept personal responsibility for the damages following such injury, permanent disability, or death. – 4. Release, waive, discharge and covenant not to sue USA Racquetball, It's affiliated clubs, regional sports organizations, their advertisers, and, if applicable, owners and lessees of premises used to conduct the event, all of which are hereafter referred to as "releases" from any and all liability to the signature on this form, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury including death or damage to property, cause or alleged to be caused in whole or in part by the negligence of the release of otherwise. The undersigned has read the preceding waiver and release, with the understanding that they have given up substantial rights by signing, and do so voluntarily. – 5. I agree to hereby the USAR Membership Code of Conduct, rules, and bylaws.**

MEMBER Signature \_\_\_\_\_

Parent/Guardian (if member is under 18) \_\_\_\_\_

### Step 3: Payment Options

Check  Cash

MC  Visa  AMEX: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp: \_\_\_\_/\_\_\_\_ CV #: \_\_\_\_\_

**(We do NOT accept Discover)**

*\*(CV# is Last 3 or 4 digits on back of card)*

Name on Card: \_\_\_\_\_ Cardholder Signature: \_\_\_\_\_

Is the billing address of the card the same as member address?  Yes  No

If NO, Billing Address of Card: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Individual Accepting Application: \_\_\_\_\_ Date: \_\_\_\_\_

Tournament Name: \_\_\_\_\_ Club: \_\_\_\_\_

Send completed form to:

USA Racquetball, 1661 Mesa Ave, Colorado Springs CO 80906 ♦ Tel: 719-635-5396 ♦ membership@usaracquetball.com