



Calling all X-Country Skiers and Snowshoers to join CLCF Nordic and embrace winter!

CLCF Nordic is a membership category within Cedar Lakes Conservation Foundation Inc. (CLCF) that provides access to parking and expertly maintained x-country classic and skating trails at the Fox Hill Nature Preserve and more open, rustic x-country trails at the Rudorf Farm. Snowshoeing is permitted on both preserves.

- The Fox Hill Nature Preserve parking lot is at 4214 Sleeping Dragon Road, West Bend, WI.
- The Rudolf Farm parking lot is at 5020 Division Road, West Bend, WI.

2020-2021 CLCF Nordic Ski Pass / Family – Individual Membership - \$75

Primary Name: _____

Additional Family Members: _____

Address: _____ City/State: _____

Zip: _____ Phone: _____ Cell: _____

Email: _____

Email addresses will be used exclusively for communications related to CLCF Nordic and the Cedar Lakes Conservation Foundation.

\$75.00 **Nordic Membership**

\$_____ Optional Additional Trail Maintenance Donation

\$_____ Total enclosed

Checks should be made payable to Cedar Lakes Conservation Foundation. Please mail this form and the completed liability waiver to: CLCF-Nordic, PO Box 347, West Bend, WI 53095

RELEASE AND WAIVER OF LIABILITY
PLEASE READ CAREFULLY!
THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS

This Release and Waiver of Liability (“Release”) is executed by the undersigned Nordic Member and, if applicable, additional family members and on behalf of minor child(ren) in favor of Cedar Lakes Conservation Foundation, Inc. and its officers, directors, employees, volunteers and agents (collectively, “CLCF”).

In consideration for CLCF permitting access and use of the Fox Hill Nature Preserve for skiing, snow shoeing, walking, hiking and any other recreational activity (“Activities”), I agree to the following of behalf of myself and, if applicable, my minor child(ren):

I waive, release and discharge CLCF of any claims, liabilities, demands of whatever kind or nature, either in law or in equity arising from bodily injury, personal injury, illness (including communicable diseases such as COVID-19), death or property damage to myself or my minor child(ren) as a result of participating in Activities whether such claims or liabilities arise from my negligence or the negligence of CLCF. I understand that this Release does not release and discharge CLCF from liability or a claim for harm caused by the intentional or reckless acts of CLCF.

Assumption of Risk: I further understand that the Activities may be hazardous to myself, and if applicable, my minor child and that such hazards could include bodily injury, personal injury, illness (including communicable diseases such as COVID-19), death or property damage. I represent that I am familiar with the hazards related to or arising out of the performance of the Activities. I further represent that I have the education, experience, and/or skill to participate in the Activities in a safe, efficient and proper manner. As provided in this Release, I hereby expressly and specifically assume the risk of injury or harm to myself and, if applicable, my minor child arising from the Activities. I have reviewed and understand all of the terms and conditions of this Release and believe them to be reasonable. I acknowledge that I had the opportunity for this Release to be reviewed by legal counsel and I either had such review performed or chose not to have such review performed.

Additional Provisions: I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Wisconsin, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Wisconsin. I agree that in the event any clause or provision of this Release is held to be invalid by any court of competent jurisdiction, the invalidity of such clause shall not otherwise affect the remaining provisions of this Release, which shall continue to be enforceable.

I understand I have the right to negotiate the terms and conditions of this Release by contacting CLCF prior to participating in the Activities and that my participation in the Activities without negotiation is deemed to be my acceptance of the Release’s terms and conditions.

On behalf of myself and my minor child (if applicable), I have executed this Release as of the day and year written below.

Signature: _____ Signature: _____

Print Name: _____ Print Name: _____

Date: _____ Date: _____

Print Name of Minor Child: _____

Print Name of Minor Child: _____

Print Name of Minor Child: _____