



Associate Member Guest Application

Palmetto Shag Club, Inc

PO Box 7232
Columbia, SC 29202-7232

2010-2011
check ___ cash ___

PSC EVENT: _____

Associate Member Guest

Please read carefully, print all information *required and submit with \$25.00.
(* Indicates required information)

*Name _____

*Address _____

*City _____ *State _____ *Zip _____

*HomePhone _____ Cell _____ Email _____

RELEASE: FOR AND IN CONSIDERATION of dues paid for an associate member guest to the Palmetto Shag Club, Inc., (hereinafter "PSC"), I, the undersigned, being of the lawful age (at least 21), do hereby release and forever discharge PSC from any and all causes of action, claims, and demands for, upon, or by reason of any damage, loss, or injury, which heretofore has been or which will hereafter be sustained by me as a consequence of attendance at PSC sponsored functions. It is understood that the act of admission to PSC sponsored functions as an associate member guest is not construed as an admission on the part of PSC of any liability to me whatsoever for any personal injury or loss.

NOTICE: An associate member guest application for PSC shall be extended to persons who are sponsored by a PSC Member *and* who conduct themselves with appropriate social demeanor. Any person involved in an incident not projecting this image will be asked to leave and have his/her associate member guest dues forfeited.

This application must be completed and signed.

In witness whereof, I have hereunto set my hand and seal this _____ day of _____, 2010(11)

Associate Member Guest _____ Member Sponsor _____
Please print name Please print name

Signature _____ Signature _____

Make checks payable to: Palmetto Shag Club

Revised 07/1/10