

# SkiCruisers Membership 2023/2024

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

Address: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Phone: Work: \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

**Please note: Our monthly newsletter is sent out via e-mail. Please make sure information below is correct and legible. (You must make a special request to the club secretary if you wish to receive it by US mail.)**

E-mail address: \_\_\_\_\_

**Below are listed some of our more popular club events. Please indicate if you would be interested in participating and circle when you would be available:**

Downhill skiing			Winter		Not Interested
Please note preferences for skiing: locally/day trip			MI mini-trip	Western weeklong	
Cross country skiing			Winter		Not Interested
Euchre Tournament	Summer	Fall	Winter	Spring	Not Interested
Broadway in Detroit (or similar)	Summer	Fall	Winter	Spring	Not Interested
Fowling, Top Golf (or similar)	Summer	Fall	Winter	Spring	Not Interested
Bowling (the usual kind ☺)	Summer	Fall	Winter	Spring	Not Interested
Weekend Get Away (such as South Haven)	Summer	Fall	Winter	Spring	Not Interested
Segway	Summer	Fall		Spring	Not Interested
Pedaler (Detroit, Rochester, Lake Orion)	Summer	Fall		Spring	Not Interested
Golf outing	Summer	Fall		Spring	Not Interested
Camping	Summer	Fall		Spring	Not Interested
Kayaking/canoeing	Summer	Fall		Spring	Not Interested
Jimmy John's Professional Baseball	Summer	Fall		Spring	Not Interested
Detroit Tigers Baseball	Summer	Fall		Spring	Not Interested
Events coordinated w/ MDSC	Summer	Fall	Winter	Spring	Not Interested
<b>Or, we are open to your suggestions:</b>					
_____	Summer	Fall		Spring	Not Interested
_____	Summer	Fall		Spring	Not Interested

Would you possibly be willing to chair or assist with any of the club events?  Yes  No

I \_\_\_\_\_, release SkiCruisers Ski Club, its officers and members from any and all liability with respect to any personal injury or property damage that may result from any SkiCruiser Ski Club sanctioned activities, including injury, loss or damages that may occur while traveling to and from such activities.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Yearly Dues: \_\_\_\_\_ New Member (\$20) \_\_\_\_\_ Renewal (\$15)

Method of Payment: \_\_\_\_\_ Cash \_\_\_\_\_ Check Check #: \_\_\_\_\_

Collected by: \_\_\_\_\_ Date paid: \_\_\_\_\_

**Make checks payable to: SkiCruisers**  
**Return form and dues to: Barb Pasciolla, 611 Catalpa Drive, Royal Oak, MI 48067**