Estacada Fungus Association

Formerly The Estacada Festival of the Fungus

Membership Application

Read carefully and return both pages with signature (s) & fees

Contact Information:	
First Name:	
Last Name:	
Mailing Address:	
City:	
State:	
Zip Code: (Please use 9 Zip Code) https://tools.usps.co	m/go/ZipLookupAction!input.action?mode=1&refresh=true
(Please include email address, as this will be the prim	ary means of communication with the association)
Email:	
Alt. Email:	
Home Phone:	
Cell Phone:	
Interests (volunteering/participating):	
□ Art	□ Hospitality
□ Book sales	□ Identification
□ Culinary	□ Leadership
□ Cultivation	□ Medicinal
□ Education	□ Newsletter
□ Festival	□ Website
□ Field Trips	

EFA Yearly Membership Fees

Initial Membership:

- \$25 per person
- \$30 per family (Two Adults at the same address and children under 18)
- \$20 for full time Students and Seniors (62+)
- \$35 Associate (Business & Government entity)

Annual Renewal:

- \$15 per person
- \$20 per family (Two Adults at the same address and children under 18)
- \$12 for full time Students and Seniors (62+)
- \$25 Associate (Business & Government entity)

New members joining after September 1st will be paid up to the end of the following year.

Membership run January 1 –December 31

<u>To Join EFA, Complete application & Liability Release Form.</u> Send both forms with fees by mail to: **Estacada Fungus Association** PO BOX 1742, Estacada, Oregon 97023

This application includes a *Liability release and Promise not to Sue*. This must be signed by all the adults joining or renewing membership to the EFA.

Estacada Fungus Association

Formerly The Estacada Festival of the Fungus

2017

Estacada Fungus Association (Herein referred to as EFA)/A non-profit Corporation, State of Oregon— Liability Release and Promise Not to Sue

I understand there is some risk in participating in a mushroom field trip, foray or any other activity —all those risks one assumes by being away from home, risks associated with moving about in fields and woods, risks involved in eating wild mushrooms, risks of losing personal property by theft or misplacement, and other expected and unexpected risks. A participant assumes all risks in picking, identifying and sampling wild mushroom. Organizers are not responsible for any advice, identification, resulting in bad reactions, illness and/or death.

In attending a **EFA**, foray, field trip, or any other activity, I agree to assume total responsibility during an event for my own safety and well-being and that of any minor children under my care, and for the protection of my and their personal property.

I release **EFA**, its owners, officers, employees, volunteers, contractors and all other persons assisting in the planning and presentations of **EFA**, foray, field trip or any other activity from liability for any sickness, injury or loss, I, or any minor children under my care, may suffer during an **EFA**, foray, field trip, or any other activity or as a result of attending or participating. I further promise not to file a lawsuit or make a claim against any persons listed above, even if they negligently cause me or any minor children under my care injury or loss.

Finally, I agree to hold the **EFA** as harmless from any liability it may incur as a result of any damage to any property I may cause. This release and promise is part of the consideration I give in order to participate in an **EFA**, foray, field trip, or any other activity. I understand it affects my legal rights. I intend it to apply not only to me but to anyone who may have the right to make a claim on my behalf. This liability release and promise not to sue remains in effect until revoked. All adults in a family are required to sign this waiver.

I agree that any photographs/video taken by the staff of the **EFA** may be used in promotions and websites.

Signature Signature	Print Name Print Name	Date Date	
Children (print nam	es):		
membership)	years of age or a dependent on pare to have my name & information listed	nt's insurance and taxes for the perio	d of th