

SHASTA MINERS AND PROSPECTORS ASSOCIATION

Please CIRCLE one: NEW membership or Renewal

Please check mark type of membership

- _____ \$40.00 Individual
- _____ \$50.00 Family (includes spouse and children under the age of 18)
- _____ \$25.00 Senior & Spouse (Age 70+)
- _____ \$40.00 Business Card Advertising (attach business card)
- _____ Donation for General Fund
- _____ Donation Legal Fund



Membership rates are for one year. Membership benefits include but not limited to: monthly digital newsletters, monthly outings, SMPA special events, enjoy free use of our many gold bearing claims, hands on education about gold prospecting and metal detecting from our many experienced members. See our web page at shastaminersandprospectors.org and join us on Facebook.

Print	First Name	Last Name	Birthdate
Member			
Spouse			
Child 1			
Child 2			
Child 3			
Address	Street:	City:	State: Zip:
Telephone	() -		Email: Receive SMPA Emails? Yes or No
Telephone	() -		Email: Receive SMPA Emails? Yes or No

The monthly newsletter is distributed electronically via email and is also uploaded to the SMPA Website.

I hereby apply for membership/renewal with SMPA. I understand that SMPA and it's agents DO NOT provide goods or services for my activities including, for example, mining equipment or supplies, lodging, transportation, food service, etc. SMPA is not liable for any negligent or willful act or failure to act by providers of such goods or services during my activities. I acknowledge that there may be certain risks involved with activities as a member including, but NOT limited to, rugged or uneven terrain, uncertain or unpredictable river currents, physical exertion for which I am NOT prepared, or other unknown forces of nature, high altitude, accident or illness without access to means of rapid evacuation or availability of medical supplies, the adequacy of medical attention once provided, or negligence on part of SMPA. I hereby agree to be responsible for my own welfare and accept any and all risks of unanticipated events, illness, injury, emotional trauma or death. I acknowledge that the cost of SMPA membership is based upon participants executing this release of liability. Therefore, as lawful consideration for being permitted to participate as a member, I hereby release and discharge forever SMPA from any and all liability arising from my membership or my activities as a member. I agree that this release shall be legally binding upon me personally, all members of my family and all minors traveling with me, my heirs, successors, assigns and legal representatives, it being my intention to fully assume all the risk associated with my activities as a member and to release SMPA from any and all liabilities to the maximum extent permitted by law.

I have read and fully understand this release and membership application.

Signature: _____

Date: _____

Print name: _____

Please make check payable to SMPA — **Mail the completed and signed application to:**
 Shasta Miners and Prospectors Association
 P.O.BOX 10929 Anderson CA 96007