**Missouri Nature and Environmental Photographers®**

Office use only

Date Rec’d\_\_\_\_\_\_\_\_\_\_

Amount $\_\_\_\_\_\_\_\_\_\_\_

Check #\_\_\_\_\_\_\_\_\_\_\_\_

Cash $\_\_\_\_\_\_\_\_\_\_\_\_\_

Pay Pal \_\_\_\_\_\_\_\_\_\_\_\_\_

**2024 Membership Form**

**Please print legibly; your SIGNATURE IS REQUIRED on the reverse side of this application in the waiver of liability**

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

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

New Member ( ) Renewal ( )

Membership for one year (Jan – Dec) is **$30.00** per person or **$40.00** for up to a four-person household.

**Payment by PayPal, check or cash is accepted**

**.**

**Turn in the SIGNED form and payment at a meeting or mail it to:**

**Kathy Cherry, 6056 Gettysburg Estates Dr., Saint Louis, Missouri 63129**

**Membership Questions: Contact Kathy Cherry; (314) 605-4279**

**APPLICATION CONTINUES ON THE REVERSE SIDE**

**PLEASE READ AND INITIAL THE RELEASE, AND SIGN THE WAIVER WHERE INDICATED**

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**Release of Images**

As a member of Missouri Nature and Environmental Photographers (MONEP), I agree that any images submitted to Show and Share, and/or the Annual Holiday Show may be used for marketing purposes on the official MONEP website, in the *Close-Up* newsletter, at approved displays and events, and on social media. By agreeing to this, I recognize that I retain ownership of these image.

**To indicate that you have read and understand this agreement, and agree to the use of your images as described above, please initial here: (\_\_\_\_\_\_\_\_\_\_\_)**

***NOTE:*** *IF YOU* ***DO NOT WANT*** *MONEP TO USE YOUR IMAGES AS DESCRIBED ABOVE, PLEASE INITIAL HERE: (\_\_\_\_\_\_\_\_)*

**Waiver of Liability and Assumption of Risk**

I hereby acknowledge that my participation in meetings, field trips, and/or activities and events of Missouri Nature and Environmental Photographers (MONEP), a Missouri not-for-profit corporation, may result in **bodily injury, damage, loss, costs, or expense** to myself or others, or to the property of myself or others. I hereby choose to accept these risks in order to participate in meetings, field trips, and other activities/events of MONEP

**Waiver of lawsuit/liability:**

**In exchange for the opportunity to participate in MONEP meetings, field trips, or other activities/events, I hereby forever release and waive my right to bring suit against MONEP and its officers, directors, agents, sponsors, donors, volunteers, or other representatives for fault in connection with injury, damage, or loss related to attending MONEP meetings, field trips, and/or other MONEP activities/events.**

I understand that this waver means I give up my right to bring negligence claims, including for personal injuries, death, disease, or property losses, or any other loss, whether known or unknown, foreseen or unforeseen.

**Choice of law:**

I understand that the law of the State of Missouri will apply to this contract

**I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE:**

X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Name (printed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Name (printed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature Date

Name (printed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature Date

Name (printed)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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