



SCCMAS New Member Application

AMA Charter #110 / www.sccmas.org / 408-292-1212

Personal Information: (Please print clearly)

Name: _____

Address: _____

City, State, Zip: _____

Home phone: _____ Work phone: _____

Email address: _____ Birth Date: _____

Omit phone/address information from club roster: "Servo Chatter" preference: Paper Electronic

Current AMA membership required: Please provide photocopy of card(s).

AMA#: _____

The SCCMAS relies upon its membership to help maintain and improve the facility. Please list any areas of expertise where you may be able to volunteer your services to the club: (publishing, electrical, heavy equipment operator, landscaping, etc....)

Occupation/Areas of expertise: _____

I have read and understand the safety rules and boundaries associated with the SCCMAS. A copy of the rules has been provided.

Date: _____ Signature: _____

In order to provide the County of Santa Clara with the protection needed, I understand that all actions of both the model and pilot of an aircraft are the responsibility of the individual piloting the aircraft.

Date: _____ Signature: _____

New Member Proficiency and Student Pilot Sign-off:

All new members, regardless of R/C experience, must be signed off by a club instructor before full membership can be accepted. Simply ask for an instructor at the field—instruction is available free of charge. Once you have completed the instruction program and have been signed-off by a club instructor, your name badge will be presented to you at the next scheduled meeting (or mailed, at your request). For new member sign-offs, the instructor may complete the Training/Proficiency Certification at the bottom of this application. For those beginning the instruction program, send in the application now—your instructor will notify the Instruction Chairman once you have been signed-off to fly solo.

New Member Dues:

(Dues listed below include a one time \$10 new member fee) Special rates available for full-time military personnel.

Open Member	\$130.00	Junior Member (15-19 years of age).....	\$55.00
Seniors (over 60).....	\$100.00	Youth (Under 15).....	\$30.00
Family Membership* (two members).....	\$150.00	Newsletter only (insurance not required).....	\$15.00

**(please include an application for each family member)*

Please mail this completed application, copy of your AMA card, and check or money order to:

Santa Clara County Model Aircraft Skypark
16345 West La Chiquita Ave
Los Gatos, CA 95032-4610

Training/Proficiency Certification (to be completed by a club check pilot)

I have supervised and witnessed the above named person (pilot) to have completed three successful takeoffs and landings with the same aircraft on the same day. In addition, I have reviewed with the pilot the club rules and boundaries of the red zone.

Date: _____ Check Pilot Name: _____

Check Pilot Signature: _____



Agreement To Release and Indemnify SCCMAS

In consideration of membership in the Santa Clara County Model Aircraft Skypark ("**SCCMAS**"), Chapter # 110 of the Academy of Model Aeronautics ("**AMA**"), the undersigned ("**MEMBER**") and the parent or legal guardian of **MEMBER**, if **MEMBER** is a minor, for themselves, their personal representatives, heirs, executors, next of kin, spouses, minor children and assigns, do agree as follows:

A. **DEFINITIONS** – the following definitions apply to the terms used in this Agreement:

1. "**PARTICIPATION IN THE CLUB**" means participation in any activities of the SCCMAS, including, but not limited to attending and/or participating in any activities at the SCCMAS skypark, engaging in model airplane activities with other SCCMAS members, and attending and/or participating in any SCCMAS sponsored activities.

2. "**SKYPARK INJURIES**" means personal injury, bodily injury, death, property damage and/or any other personal or financial injury sustained by **MEMBER** as a result of member's **PARTICIPATION IN THE CLUB** and/or as a result of the administration of any SCCMAS programs. If **MEMBER** is under 18 years of age, the term "Club Related Injuries" means personal injury, bodily injury, death, property damage and/or any other personal or financial injury sustained by **MEMBER** as well as personal injury, bodily injury, death, property damage and/or any other personal or financial injury sustained by **MEMBER's** parents or legal guardians, as a result of **MEMBER's PARTICIPATION IN THE CLUB** and/or as a result of the administration of any SCCMAS programs.

3. "**RELEASED PARTIES**" means the following, including their affiliate or subsidiary organizations, officers, directors, agents, employees, officials (elected or otherwise), lessors, lessees, and volunteer workers:

- a. Santa Clara County Model Aircraft Skypark, a California Corporation, also known as the Tomcats R/C Club, being chapter number 110 of the Academy of Model Aeronautics ("**SCCMAS**")
- b. Santa Clara County Parks And Recreation Department

B. I FOREVER RELEASE AND DISCHARGE the **RELEASED PARTIES** from any and all liabilities, claims, demands, or causes of action that I may hereafter have for **SKYPARK INJURIES**, however caused, even if caused by the negligence (whether active or passive) of any of the **RELEASED PARTIES**, to the fullest extent allowed by law.

C. I WILL NOT SUE OR MAKE A CLAIM against any of the **RELEASED PARTIES** for loss or damage on account of **SKYPARK INJURIES**. If I violate this agreement by filing such a suit or making such a claim, I will pay all attorneys' fees and costs of the **RELEASED PARTIES**.

D. I WILL INDEMNIFY, HOLD HARMLESS AND REIMBURSE the **RELEASED PARTIES** from any loss, liability, damage, attorneys fees, or costs that they may incur due to the **MEMBER's** presence in, upon or about the SCCMAS skypark or in any way observing, or using any facilities or equipment of the SCCMAS, or due in whole or in part to any actions of the **MEMBER's**, whether caused to any extent by the negligence or the **RELEASED PARTIES** or otherwise.

E. I HEREBY ASSUME FULL RESPONSIBILITY AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to the negligence of the **RELEASED PARTIES** to the full extent allowed by law.

F. I AGREE THAT this Agreement shall be governed by and construed in accordance with the laws of the State of California.

G. SEVERABILITY. If any part, article, paragraph, sentence or clause of this Agreement is not enforceable, the affected provision shall be curtailed and limited only to the extent necessary to bring it within the requirements of the law, and the remainder of the Agreement shall continue in full force and effect.

H. I REPRESENT THAT **MEMBER** is at least 18 years of age, or, that I am the parent or legal guardian of **MEMBER** and am making this agreement on behalf of myself and **MEMBER**. If I am the parent or legal guardian of **MEMBER**, I AGREE TO INDEMNIFY AND REIMBURSE the **RELEASED PARTIES** for their defense and indemnity from any claim or liability in the event that **MEMBER** suffers **SKYPARK INJURIES** as a result of **MEMBER's PARTICIPATION IN THE CLUB**, even if caused in whole or in part by the negligence (whether active or passive) of any of the **RELEASED PARTIES**.

Member's Signature

Date

Signature of Member's Parent or Legal Guardian if Member is under 18 years of age

Date