



## 2024 Agreement of Waiver Liability

(New & Renewal Members)

Complete and Return form by: **December 31, 2023**

For January 1<sup>st</sup> – December 31<sup>st</sup> 2024

Date \_\_\_\_\_ PPA Membership# (if applicable) \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

*Please return to: 2023/2024 CC Treasure: **ROBERT NEAR, 1 GREENSBURG CT, UNIT 1217, ATHENS, NY 12015** OR email to Rob at: [rjnear3256@gmail.com](mailto:rjnear3256@gmail.com)*

### AGREEMENT OF WAIVER OF LIABILITY:

I acknowledge that there are risks involved in participating in the events or activities of Capital Champlain Professional Photographers Society of NY State, (aka CCPPSNY), and I accept full responsibilities for any injury or accident (or any damages of any kind) that I may sustain when participating in CCPPSNY activities. I agree to indemnify, defend and hold harmless CCPPSNY, its officers, agents, speakers, and instructors, including, without limitation, the payment of reasonable attorney fees, for any claim that I may bring against persons or entities.

Members of Capital Champlain agree to follow all recommendations and safety measures to abide by the CDC guidelines in force at the time of their meeting or event. Capital Champlain and members of Capital Champlain explicitly agree and understand that following these procedures will help to insure our efforts to keep each other safe.

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

We are an affiliate of



