



**1<sup>st</sup> Oregon Volunteer Infantry**  
**20<sup>th</sup> Maine Volunteer Infantry**  
*Company A*



## ***2020 Membership Renewal Form***

As a member(s) in good standing of the 1<sup>st</sup> Oregon Volunteer Infantry (1<sup>st</sup> OVI) in 2019, I (we) request renewal of my (our) membership for the year 2020.

☐ **Individual membership renewal \$22**

☐ **Family membership renewal \$32.50**

*A family is defined as all interested persons residing in the same household.*

**NAME**

**E-MAIL**

**AGE ON 10/1**

*(for voting purposes)*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Address:**

\_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Zip Code)

**Telephone:** (     ) \_\_\_\_\_

☐ Please check if this is a new address, phone number, or E-mail for you.

**I (we) acknowledge that I (we) am (are) fully aware of the nature and purpose of the activities of the 1<sup>st</sup> OVI. I (we) understand that these activities are potentially dangerous, and I (we) voluntarily accept any risk involved. I (we) have received a copy of the 1<sup>st</sup> OVI bylaws and I (we) agree to read and be bound by the rules and policies contained therein.**

\_\_\_\_\_  
*Signature(s) (Parent signature will be considered applicable to minor children)* \_\_\_\_\_ *Date*

\_\_\_\_\_  
*Signature(s) (Parent signature will be considered applicable to minor children)* \_\_\_\_\_ *Date*

**Return this form with your check payable to 1<sup>st</sup> OVI to the membership coordinator:**

*Cheryl Rice*  
*5918 SE Iris Court*  
*Milwaukie, Oregon 97267-1851*  
*cheryllrice@comcast.net*

➤ Northwest Civil War Council membership requires a separate form available at [www.nwcwc.net](http://www.nwcwc.net)

**1<sup>st</sup> Oregon Volunteer Infantry (1<sup>st</sup> OVI)**  
**GENERAL RELEASE OF LIABILITY**

**Since reenacting is dangerous, we require all parties to assume all risk by signing this General Release of Liability.**

I acknowledge that reenacting, black powder shooting, and related activities are **HAZARDOUS** activities and that I have made a voluntary choice to participate in these activities despite the risks they may present. In consideration of being permitted to participate in the activities described above of the 1<sup>st</sup> OVI, I agree to assume **ANY AND ALL RISKS OF INJURY OR DEATH** which might be associated with or result from my participation in 1<sup>st</sup> OVI events.

**INITIAL HERE** \_\_\_\_\_

I further release, waive, discharge and covenant not to sue the 1<sup>st</sup> OVI, the organizers of any 1<sup>st</sup> OVI event, the trustees of, officers of, agents of, employees of, or members of the 1<sup>st</sup> OVI, or the owner or lessor of any property on which the 1<sup>st</sup> OVI conducts any activity; from all liability to myself or any other party claiming an interest through myself, for all loss or damage or demand thereof on account of injury to the person or property, or death of myself, whether caused by their **NEGLIGENCE** or for any other reason, while preparing for, traveling to, or from participating in any 1<sup>st</sup> OVI event.

**INITIAL HERE** \_\_\_\_\_

I further **INDEMNIFY AND HOLD HARMLESS** the parties released above and each of them from loss, liability, damage, or claim they may incur due to the presence of my actions during 1<sup>st</sup> OVI events whether caused by their negligence or otherwise.

**INITIAL HERE** \_\_\_\_\_

I understand the 1<sup>st</sup> OVI will not provide compensation for any injury to me, or for any damage to my property. I must pay for any such damage or injury to myself or property myself or through my own insurance.

**INITIAL HERE** \_\_\_\_\_

It is the intent of the undersigned that the above release be as broad and inclusive as allowed by law and that if any portion is invalid, the remainder shall continue in full force and effect. This release is entered into solely for the benefit of the 1<sup>st</sup> OVI, its officers, trustees, agents, and members when engaged in activities which promote the participation in 1<sup>st</sup> OVI sanctioned events, or the participation for or travel to such events and does not confer a release upon parties not acting in such capacity.

**INITIAL HERE** \_\_\_\_\_

I the undersigned have read and understand this release and all its terms. I warrant that the above is true and correct in all respects and that no oral representations, statements, or inducements apart from the foregoing have been made.

**DATED:** \_\_\_\_\_ **SIGNED:** \_\_\_\_\_

**PRINTED NAME:** \_\_\_\_\_

**Signature of Guardian of Minor Child:** \_\_\_\_\_