

**NOMAD Membership Annual Renewal –2017 Due by January 15, 2017**  
**PLEASE CHECK TYPE OF MEMBERSHIP:**

\_\_\_\$40 Working Member (10 hours of club-related activity)

\_\_\_\$75 Supporting Member

\_\_\_\$0 Jr. Handler (under 17) (10 hours of club-related activity suggested)

**All new members who joined after June 30, 2016 are exempt from 2017 dues but must return this renewal form.**

**Member Name:** \_\_\_\_\_

**For Working Members: Please keep track of your own working hours including the activities they supported.**

**I would like to join (or continue on) the following committee(s):** Indicate any/all committees on which you wish to serve for 2017 even if you were on the same committee(s) last year. Committee chairpersons will be selected early in 2017 by the committee members.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> NADAC Trial Committee | <input type="checkbox"/> USDAA Trial Committee | <input type="checkbox"/> CPE Trial Committee |
| <input type="checkbox"/> Membership Committee  | <input type="checkbox"/> Practice Committee    | <input type="checkbox"/> Equipment Committee |
| <input type="checkbox"/> Seminar Committee     |  |  |

**Sign the liability waiver below and send this form along with your check payable to “NOMAD” to: Billie Marsh, 110 Napper Road, Westport, NY 12993**  
**Please provide any updates or changes to the information requested below. If nothing has changed, then leave blank. If you have new dogs to join, please send that information to Dale Healy using the form that is on the NOMAD website (nomadagility.com). (If you no longer have a dog, please indicate below)**

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

**Address** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Cell/Work Phone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Deletions to dog members** \_\_\_\_\_

**Liability Waiver**

I understand that there are a variety of risks to me and my dog from attending NOMAD activities. These risks include, but are not limited to, getting hit by a car, bitten by a dog, tripping and falling, spraining ankles or breaking bones.

Understanding these risks, I voluntarily and knowingly waive any right I (and others on my behalf) might otherwise have to make any claim against any member or officer of Northern Magic Agility Dogs, Inc. (NOMAD) and/or any other person or entity connected with NOMAD activities (including, but not limited to, the owner or lessee of any property used by NOMAD) for any and all injuries or damage related to any NOMAD event.

Signature: \_\_\_\_\_

Date \_\_\_\_\_