

WWII RESEARCH & PRESERVATION SOCIETY

2406 RIDGEWOOD CT. MODESTO, CA 95350 - WWW.WW2RPS.COM

209-521-3555 / 209 996-3055

www.ww2rps.com

MEMBERSHIP APPLICATION / YEARLY RENEWAL

(Please print clearly)

NAME _____

ADDRESS _____

TELEPHONE _____ E-MAIL _____

Age _____ Date of Birth _____ DRIVERS LICENCE # _____

(Military vehicle owners only)

Are you a minor? YES ___ NO ___

(if "yes" a parental consent/waiver must accompany this application for participation)

NRA Member ___ YES ___ NO ___ (please circle one)

Hunter safety course ___ YES ___ NO ___ (please circle one)

Emergency contact information: (while you are at an RPS event)

Name _____ Phone _____ Relation _____

Year Due's are for _____

Unit you are joining (1st impression units only) _____

Membership fee \$25.00 per year Payable to "WWII RPS" CK# _____

I am applying for membership in the World War II Research and preservation Society, Inc. (WWII RPS), and fully understand that this organization is dedicated in portraying the average soldier of WWII. I also understand that the WWII RPS is an apolitical organization for the sole purpose of historical interest and does not condone any form of Nazi or racist beliefs. The WWII RPS is a 501c Non-profit corporation. I understand that there is an annual membership fee of \$25.00 payable to the WWII RPS, as well as varying individual unit fees. The WWII RPS, Inc. has no control over the admissions policies of units portrayed within this organization. Any individual applying for membership to the WWII RPS, Inc. must be enrolled in or accepted into an existing WWII RPS unit prior to this application being approved. In joining the WWII RPS, I will abide by all safety rules and regulations of the organization. I will further conform to all uniforms, weapons, and grooming standards of the unit in which I am a member of.

I have read the "RPS CODE OF CONDUCT", understand it, and by signing this application, I am willing to abide by it in its entirety.

In exchange for the privilege of participation in all RPS functions, I will not hold the WWII RPS, Inc. or the Officers of the WWII RPS, Inc. or any Unit Leader of the WWII RPS, Inc liable for any injury to myself or damage to my equipment thru my own negligence or the negligence of others.

Signature _____ Date _____

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ACKNOWLEDGMENT OF RISK AND HOLD HARMLESS FOR ALL REENACTMENT PARTICIPANTS

I, _____ hereby acknowledge that I have voluntarily chosen to participate in the activities of the World War II Research and Preservation Society, Inc., (RPS) and use of the facilities rented including, but not limited to, Camp Roberts, Fort Ord, Fort Hunter Leggett, Camp Rilea, Camp San Luis Obispo, or any other place designated as the battle site (hereinafter called "the reenactment").

I understand the risks involved in the reenactment. I recognize that the reenactment and its activities involves risk of injury and I agree to accept any and all risks associated with it, including but not limited to property damage or loss, minor bodily injury, severe bodily injury, and death. Furthermore, I recognize that participation in the reenactment involves activities and risks incidental thereto, including but not limited to, travel to and from reenactments, blank firing weapons, being in and in close proximity of military vehicles, explosions, limited availability of medical assistance, and the possible reckless conduct of other participants. I am voluntarily participating in the reenactment with the knowledge of the risks involved and hereby agree to accept any and all inherent risks of property damage, bodily injury, or death. In consideration of my participation in the reenactment and to the fullest extent permitted by law, I agree to indemnify, defend and hold harmless the World War II Research and Preservation Society, Inc., (RPS), its officers, directors, employees, agents, volunteers and assigns from and against all claims arising out of or resulting from my participation in the reenactment. "Claim" as used in this agreement means any financial loss, claim, suit, action, damage, or expense, including but not limited to attorney's fees, attributable to bodily injury, sickness, disease or death, or injury to or destruction of tangible property including loss of use resulting there from. In addition, I hereby voluntarily hold harmless the World War II Research and Preservation Society, Inc., (RPS), its officers, directors, employees, agents, volunteers and assigns from any and all claims, both present and future, that may be made by me, my family, estate, heirs or assigns.

I also understand that the World War II Research and Preservation Society, Inc., (RPS) does not provide any medical or 2
ance to cover these expenses.

I further understand that this acknowledgment of risk and hold harmless is intended to be as broad and inclusive as permitted by the laws of the State of California and that if any portion hereof is held invalid, I agree that the balance shall, notwithstanding, continue in full legal force and effect.

I agree that this acknowledgment of risk and hold harmless is effective for as long as I am a member or participant in the reenactment.

NAME _____ **SIGNANTURE** _____ **DATE** _____