



# USA WATER SKI

## Club Affiliation Form

For Office Use Only

1251 Holy Cow Road, Polk City, Florida 33868-8200  
(800) 533-2972 Fax: (863) 325-8259 Email: memberservices@usawaterski.org

To join/renew online, visit: [www.usawaterski.org/members](http://www.usawaterski.org/members)

### CLUB INFORMATION

Club Membership # \_\_\_\_\_

\*Club/School Name \_\_\_\_\_

#### \*SITE INFORMATION (mandatory)

Does club utilize more than one site?  No  Yes (If yes, list additional sites on a separate page)

Site/Body of Water for all Club Activities \_\_\_\_\_

Site Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\*Club's Web Site Address \_\_\_\_\_

#### SPORT DISCIPLINES (check ALL that apply)

- 3-Event - AWS (Slalom, Trick and/or Jump)
- Barefoot - ABC
- Disabled - WSD
- Kneeboard - AKA
- Ski Race - NWR
- Collegiate - NCW
- Hydrofoil - USH
- Show Ski - NSS
- Wakeboard - USW (including Collegiate WB)

#### IMPORTANT

USA Water Ski provides insurance coverage to USA Water Ski affiliated clubs in connection with sanctioned events. Please refer to the USA Water Ski Insurance Fact Summary for details. USA Water Ski affiliated clubs are also eligible to purchase insurance coverage for Club activities and exposures which fall outside of the insurance provided by USA Water Ski as part of sanctioning. Please refer to the USA Water Ski Web site for further details.

\*Specified contact information will be posted on USA Water Ski's Web site, [www.USAWATERSKI.org](http://www.USAWATERSKI.org).

### CONTACT INFORMATION

All mail and e-mail correspondence from USA Water Ski will be sent to the following:

Contact Person \_\_\_\_\_ Current Membership # \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone - Home ( ) \_\_\_\_\_ Work ( ) \_\_\_\_\_

Fax Number ( ) \_\_\_\_\_ Mobile ( ) \_\_\_\_\_

\*E-mail Address \_\_\_\_\_

CLUB OFFICERS	NAME	CURRENT MEMBERSHIP # <i>(all club officers must be current active members of USA Water Ski)</i>
President:		
Vice President:		
Secretary:		
Treasurer:		

"We hereby apply for club membership in USA Water Ski, and acknowledge and agree:

- to abide by the rules and regulations established by USA Water Ski for club membership and sanctioned events;
- that USA Water Ski shall not be responsible for any indebtedness or acts or omissions of our club, its officers and members;
- that coverage for our club will only apply with respect to tournaments, practices, exhibitions, clinics and related activities sanctioned and approved by USA Water Ski;
- that all boats used in connection with USA Water Ski-sanctioned events must be insured in accordance with the **2015 Boat Insurance Requirements** established by USA Water Ski;
- that all club members who participate in any USA Water Ski-sanctioned events must be current Active members of USA Water Ski, and that each Active member of USA Water Ski will be required to sign a **Participant Waiver and Release of Liability** as part of membership."

Club President's PRINTED NAME

Membership #

Signature

Date

### PAYMENT INFORMATION

*Allow 10 days for processing club application and certificate of insurance requests. Add \$15 for rush processing (7 days)*

USA Water Ski Club Membership Fee ..... \$ 100

Certificate of Insurance Requests (Complete the back of this form to request certificates of insurance for third parties.)

Please issue certificates of insurance as requested on the back of this form:

# of certificates \_\_\_\_\_ @ \$50/each (all certificates of insurance will be e-mailed to club contact person noted above) \$ \_\_\_\_\_

Rush Processing Fee (\$15) ..... \$ \_\_\_\_\_

Payment Method:  Check/Money Order (payable to USA Water Ski)  MasterCard  Visa **TOTAL AMOUNT DUE:**  

Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ CCV # \_\_\_\_\_ Auth # \_\_\_\_\_

Cardholder's Billing Address \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Cardholder's Printed Name \_\_\_\_\_ Signature \_\_\_\_\_

## CERTIFICATE REQUEST #1

Complete for each third party requiring a certificate of insurance from your club with respect to USA Water Ski-sanctioned events.

**NOTE: Coverage only applies with respect to tournaments, practices, exhibitions, clinics and related activities sanctioned and approved by USA Water Ski.**

Certificate Holder's Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone - Main (\_\_\_\_) \_\_\_\_\_ Alternate (\_\_\_\_) \_\_\_\_\_

Fax Number (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Certificate is for: **NOTE: Certificates for specific sanctioned events will not be issued until event is sanctioned and approved by USA Water Ski**

Year-Round Sanctioned Event Activity by Club  Specific Sanctioned Event

Specific Sanctioned Event Type:  Tournament  Basic Skills Clinic  Practice  Exhibition Sanction # \_\_\_\_\_

Event Title \_\_\_\_\_ Date(s) \_\_\_\_\_

Has the club entered into any agreement, contract or permit which contains assumption of liability, indemnification or hold harmless language?

No  Yes **(a copy of the document should be attached to this application)**

Does the certificate holder require additional insured status?  No  Yes **(please note relationship of additional insured)**

Manager/Lessor of Premises (Landlord of Premises)  Political Subdivision Permit  Property Owner  Sponsor

Other: \_\_\_\_\_

## CERTIFICATE REQUEST #2

Complete for each third party requiring a certificate of insurance from your club with respect to USA Water Ski-sanctioned events.

**NOTE: Coverage only applies with respect to tournaments, practices, exhibitions, clinics and related activities sanctioned and approved by USA Water Ski.**

Certificate Holder's Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone - Main (\_\_\_\_) \_\_\_\_\_ Alternate (\_\_\_\_) \_\_\_\_\_

Fax Number (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Certificate is for: **NOTE: Certificates for specific sanctioned events will not be issued until event is sanctioned and approved by USA Water Ski**

Year-Round Sanctioned Event Activity by Club  Specific Sanctioned Event

Specific Sanctioned Event Type:  Tournament  Basic Skills Clinic  Practice  Exhibition Sanction # \_\_\_\_\_

Event Title \_\_\_\_\_ Date(s) \_\_\_\_\_

Has the club entered into any agreement, contract or permit which contains assumption of liability, indemnification or hold harmless language?

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Other: \_\_\_\_\_

## CERTIFICATE REQUEST #3

Complete for each third party requiring a certificate of insurance from your club with respect to USA Water Ski-sanctioned events.

**NOTE: Coverage only applies with respect to tournaments, practices, exhibitions, clinics and related activities sanctioned and approved by USA Water Ski.**

Certificate Holder's Name \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone - Main (\_\_\_\_) \_\_\_\_\_ Alternate (\_\_\_\_) \_\_\_\_\_

Fax Number (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Certificate is for: **NOTE: Certificates for specific sanctioned events will not be issued until event is sanctioned and approved by USA Water Ski**

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Other: \_\_\_\_\_

Questions? Contact our member services team at: USA Water Ski Member Services Department -- 1251 Holy Cow Road, Polk City, Florida 33868-8200  
(800) 533-2972 -- Fax: (863) 325-8259 -- [memberservices@usawaterski.org](mailto:memberservices@usawaterski.org)

**Thank you for your affiliation!**