

SEND APPLICATION OR INQUIRIES TO

WEGM MEMBERSHIP DIRECTOR
P.O. BOX 910
DAHLONEGA, GEORGIA 30533

PLEASE PRINT LEGIBLY

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: [] _____

EMAIL: _____

SPOUSE: _____ CHILDREN UNDER 21: _____

HAVE YOU EVER BEEN A MEMBER OF WEGM? YES [] NO [] IF YES, MEMBER NUMBER: _____

RELEASE OF LIABILITY

I, recognize that mining and prospecting are inherently dangerous, and that the club's lease's have unmarked and unidentified hazards, to include abandoned mine shafts, caves, sink holes, steep slopes and other people, both invitees, licensees and trespassers and that any one or combination of the above can cause injury or death. I waive any claim against the Week End Gold Miners Prospecting Club Inc. or the land owners and covenant not to sue for any damages, injury or death caused to me, or for the loss of equipment or personal items while on the lease's. I further recognize that there are special dangers to minors and I shall assume all responsibility for each minor accompanying me, I further agree to carry such insurance as I feel necessary to protect my interest and to indemnify and hold harmless owners from any liability arising out of my actions while on the lease's.

FINANCIAL WAIVER

I, being accepted as a member of the WEEKEND GOLD MINERS PROSPECTING CLUB INC. do here-by agree to abide by the by-laws and rules and regulations of WEGM. I understand that I have the right to resign my membership at any time by returning the key and membership card issued to the membership director. I also understand that if my membership is terminated for any reason other than resignation that I am obligated to return these items with in (30) thirty days. I further understand that if I do not return these items that they can be repossessed by WEGM by what ever legal means necessary and that I may be held responsible for any cost of such legal action.

SIGNATURE: _____ **DATE:** _____

WEGM USE ONLY BELOW THIS LINE

Amount Received:\$ _____ How paid: Check [] Check Number _____ Money order [] M.O. Number _____
Cash [] Credit Card []

The above individual is accepted as a member and has been assigned membership number [] on this date []

Membership Director Signature: _____