



# FROST VALLEY YMCA OUTDOOR SPORTING PROGRAM APPLICATION/RENEWAL FORM

TEL: 845-985-2291 ext. 217 EMAIL: [akordziel@frostvalley.org](mailto:akordziel@frostvalley.org)

**FROST VALLEY HUNTERS:**  
**PLEASE CONTACT YOUR STAFF SPONSOR PRIOR SUBMITTING YOUR APPLICATION**

The Outdoor Sporting Program runs annually from April 1 - March 31. Other restrictions apply. See Rules and Regulations.

Please complete and return the application with the program fee enclosed. It is understood that this fee will be returned if your application is not approved.  
**One application per person.**

**CHECK ALL THAT APPLY:**     New Application     Renewal     Family Package (1 application per family member)

Trail Access (Hiking, Snowshoeing, X-Country Skiing, Wildlife Watching, and Disc Golf)

Fishing/Trail Access     Hunting/Trail Access\*     All Inclusive

Full Name: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Gender: \_\_\_ Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Zip Code \_\_\_\_\_

Physical Address (please list if different from above): \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ County \_\_\_\_\_ Zip Code \_\_\_\_\_

Primary Phone: Home/Cell/Work \_\_\_\_\_ Secondary Phone: Home/Cell/Work \_\_\_\_\_

I would like to receive The Forester newsletter (check all that apply):

physically (by mail)     electronically (e-mail)     I do not wish to receive The Forester

**\*For Frost Valley Hunters**

Frost Valley Staff Sponsor Name (Required for hunting program participants): \_\_\_\_\_

Frost Valley Staff Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Release and Indemnification Agreement**

I, the undersigned, desire to join the Frost Valley YMCA Outdoor Sporting Program in order to access Frost Valley YMCA property. In connection therewith and in consideration therefore, the undersigned agrees to comply with all New York State Game Laws and with the incorporated by reference herein. The undersigned also agrees to defend, indemnify, and hold harmless the Frost Valley YMCA and its officers, directors, employees, volunteers and agents (collectively, "the Frost Valley YMCA") from and against any and all claims, demands, suits, debts, actions, liabilities, damages, losses, causes of actions, judgments, costs and expenses of any nature whatsoever in law and equity, including without limitation reasonable attorney's fees (collectively "claims"), suffered or incurred by the Frost Valley YMCA in connection with the undersigned's hunting/fishing/hiking/trail use activities and activities associated therewith on Frost Valley YMCA property.

In addition, the undersigned, for himself or herself, and for his or her heirs, personal representatives and assigns, hereby releases and forever discharges the Frost Valley YMCA from any and all Claims for death, bodily injury or property damage arising from or occurring during the undersigned's hunting/fishing/hiking/trail use activities and activities associated therewith on Frost Valley YMCA property, including without limitation any damages, injury or death arising from or relating to the care, custody or control of real property in the possession of the Frost Valley YMCA.

The undersigned acknowledges that he or she has carefully read this Release and Indemnification Agreement and that he or she fully understands the contents of this document. The undersigned further acknowledges that the execution of this agreement is a free act and deed and indicates voluntary acceptance of all terms set forth herein.

**Rules and Regulations: (Changes have been made from last year)**

I have read the Frost Valley YMCA Outdoor Sporting Program Rules and Regulations and agree to comply with all Frost Valley YMCA rules and regulations pertaining to my program, all NYS Department of Environmental Conservation Laws, all facility usage policies as established by the Frost Valley YMCA Board of Trustees, and agree to the Release and Indemnification.

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

Date: \_\_\_\_\_

**Complete and Sign the Two-Sided Background Check Declaration Form:**

Frost Valley YMCA does everything we can to ensure the safety of our guests. As part of this process we conduct criminal background checks. Attached you will find a criminal background check form. The criminal background check declaration form must be completed and submitted in order for your application to be processed. (Only for applicants 18 and older)

**Emergency Contact:**

Full Name: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Primary Phone: Home/Cell/Work \_\_\_\_\_ Secondary Phone: Home/Cell/Work \_\_\_\_\_

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

**RETURN APPLICATION AND PROGRAM FEE TO:**

**Natural Resources Director  
Frost Valley YMCA  
2000 Frost Valley Rd  
Claryville, NY 12725**

**NOTE: Incomplete applications will not be processed and will be returned. Please review all information to be sure it's complete and accurate.**