Quail Creek Pottery & Sculpture Club (QCPOTS) Membership Form

Date:	New Membership	□Renewal	for year 2026	
Please print all contact informa	tion clearly. Check here if info	has changed:	: 🗆	
NAME:				
EMAIL:				
PRIMARY PHONE #:				
QC STREET ADDRESS:				_
Emergency Contact:		Phone:		
QUA	IL CREEK POA WAIVER	AND RELEA	ASE	
The undersigned desires to use the (CATC). By executing this Waiver ar undersigned is solely responsible for the POA nor any of its respective at members, QCPOTS monitors or instructivities at the CATC. The undersigned claims, liabilities, action, damage, cundersigned's use of the CATC and	nd Release, the undersigned here or his/her actions while using the filiates, officers, employees, age tructors are responsible for the unned hereby releases and agrees osts and expenses that arise because	by acknowledge CATC and neith nts or represent ndersigned's act to release all the	es and agrees that th ner the Robson Comn tatives, nor QCPOTS ctions or safety while e foregoing parties fr	ne munities nor board engaging in
My signature below also certifies the resident of Quail Creek as defined section 1.48). As a member of the constitution of the	pecifically in the QC Declaration	of Covenants, C	Conditions and Restri	ctions (CC&R
SIGNATURE:	DATE:			
For Office	Use Only, Do Not Write Below t	his Line		
Date Paid: Ch	eck#· Treasurer's Ir	itiale:		