



## Sewickley Area Mothers Club

2023 – 2024 Membership Registration Form

First & Last Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Your partner's name (if applicable): \_\_\_\_\_

Name(s) and age(s) of your child(ren): \_\_\_\_\_

Are you a New or Returning member?  New  Returning

How did you hear about Sewickley Area Mothers Club?

Returning member  Flyer advertisement in town  Social media  Friend

SAMC organizes age-specific play dates which involve about 2 hours of casual play time. These play dates are a chance for moms and children to socialize. Please select ALL groups that apply to your family.

Babies (newborn - 18 months)

3 & under

4 & over

None – interested in Moms Nights Out (MNO) only

Our Sunshine Coordinator helps members during times of transition by setting up a meal train.

Transitions can include a new baby, long-term illness or injury. If you anticipate needing a meal train this year, please provide approximate dates.

A quick legal requirement:

We need you to read and accept this liability waiver for Mothers Club events:

\* I understand that my participation and the participation of any members of my family in any Sewickley Area Mothers Club activity or event is completely voluntary, and we hereby give permission for me and my family to join in those activities or events. My family shall hold harmless the Sewickley Area Mothers Club and any of its volunteers or representatives, and/or the providers of any activity or event location and/or materials from any liability and/or responsibility for any accident, illness, or injury that occurs during or as a result of any function.

\* Important notice regarding COVID-19: Please note any interaction with the general public poses an elevated risk of being exposed to COVID-19 and we cannot guarantee that you will not be exposed while in attendance at any of our Sewickley Area Mothers Club events. We encourage you to follow all safety policies as well as local laws and restrictions. I accept that the final responsibility for my safety and that of my family rests with me.

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

I have enclosed \$50 in annual dues for the SAMC Full Membership.

I have enclosed \$30 in annual dues for MNO events only

I would like to support this year's chosen charity and have added a donation of \$\_\_\_\_\_ to my check. For more information on the charity, check out our website at [www.sewickleymoms.com](http://www.sewickleymoms.com)

**Please mail this registration form and dues to SAMC, P.O. Box 149 Sewickley, PA 15143**  
**Checks can be made payable to Sewickley Area Mothers Club.**