



**Sons of Italy of Ocean City Lodge #2474
P. O. Box 4596
Ocean City, Maryland 21843**

I, _____ (*printed name*), agree that the Sons of Italy of Ocean City Lodge #2474 (“Lodge”) will not be responsible for any injuries, illnesses, damages or related expenses arising out of my participation in the Lodge sponsored trip described below, and I am in proper health and physical condition to meet the physical requirements associated with this trip.

Description of Trip

Date(s) of Trip

Signature

Date

Street Address

City

State

Postal Code

Telephone Number (with Area Code)

Email Address

Emergency Point of Contact:

Name

**Telephone Number
(with Area Code)**

Relationship