Saline County Striders

MEMBERSHIP/SUBSCRIPTION APPLICATION

Dues: $20 per year per individual
$25 per year per family in the same household

Name: _____ DOB: _____

Address: _____

City, State, Zip: _____

Telephone # _____ E-Mail: _____

Spouse's Name: _____ E-Mail: _____ DOB: _____

Name(s) and DOB of Children: _____

New___ or Renewal ___

Waiver

I agree that I am a member of the Saline County Striders, and I know that running in and volunteering for organized group runs, social events, and races with this club are potentially hazardous activities, which could cause injury or death. I will not participate in any club organized events, group training runs or social events, unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform all activities associated with the club and am in good health, and I am properly trained. I agree to abide by all rules established by the club, including the right of any official to deny or suspend my participation for any reason whatsoever.

I attest that I have read the rules of the club and agree to abide by them. I assume all risks associated with being a member of this club and participating in club activities which may include: falls, contact with other participants, contract service providers, employees, and spectators including the potential the contraction of a communicable disease resulting from contact with other participants/members, volunteers, race personnel, contract service providers, employees, and spectators. I assume all risks including the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, baby joggers, roller skates or roller blades, animals, and personal music players are not allowed to be used in club organized activities and I agree to abide by this rule.

Having read this waiver and knowing these facts and in consideration of your accepting my membership, I, for myself and anyone entitled to act on my behalf, waive and release this club and the Road Runners Club of America, all club sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation with the club, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record for any legitimate promotional purposes for the club.

Signature: _____ Date: _____

Sign the waiver above, enclose check for $20 individual / $25 family payable to Saline County Striders and mail to:

Saline County Striders
P.O. Box 84
Benton, AR 72018