

Shawangunk Runners

Membership Form

Cost: \$20 for 1 year for an Adult or Family membership (Membership ends on 12/31 of each year)
 \$10 for 1 year for a Student (Under 18)

Benefits: Free entry into the Shawangunk Runners New Paltz Summer Series (4 Races + Fun Run)
 * Normally \$20 for an Adult or \$30 for Family
 Free Shawangunk Runners Oval Sticker (Collect at race or meeting)

Name _____	Gender <u> </u> M <u> </u> F
Address _____	Date of Birth _____
_____	Phone _____
_____	New Member <u> </u> Y <u> </u> N
Email _____	

Additional Family Members (please print clearly)

Name _____	DOB <u> </u> / <u> </u> / <u> </u> Gender <u> </u> M <u> </u> F
Name _____	DOB <u> </u> / <u> </u> / <u> </u> Gender <u> </u> M <u> </u> F
Name _____	DOB <u> </u> / <u> </u> / <u> </u> Gender <u> </u> M <u> </u> F
Name _____	DOB <u> </u> / <u> </u> / <u> </u> Gender <u> </u> M <u> </u> F

I agree that I am a member of Shawangunk Runners, 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, 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. 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 the Shawangunk Runners, 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. (Each adult member must sign. Parent or guardian must sign for members under 18 years of age.) I/we the undersigned have read and understand this waiver:

Signed _____	Date <u> </u> / <u> </u> / <u> </u>
Signed _____	Date <u> </u> / <u> </u> / <u> </u>
Signed _____	Date <u> </u> / <u> </u> / <u> </u>
Signed _____	Date <u> </u> / <u> </u> / <u> </u>
Signed _____	Date <u> </u> / <u> </u> / <u> </u>



Make checks payable to **Shawangunk Runners** and mail to
Christopher Regan at 7 Park Ave, Wappingers Falls, NY 12590