Indiana Road Runners Club Membership Application 2023/24

New Memberships Good Through the End of 2024 - Only \$15.00

Name			
Address			
City		State	Zip Code
Telephone ()	E-mail		
Spouse/Partner/Significant Other			
Additional Family Members			
Occupation	Years Ru	unning Mi	les Per Week
Annual Membership Fee: \$15.00 Pe Mail to: John Swaug Please read, sign and date the following	er, Treasurer, 522 Loc		
I agree that I am a member of this club, a social events, and races with this club are not participate in any club organized eve properly trained, and by my signature, I club and am in good health, and I am proincluding the right of any official to deny	e potentially hazardous a nts, group training runs o certify that I am medically operly trained. I agree to	ctivities, which cou or social events, unl y able to perform al abide by all rules es	ld cause injury or death. I will ess I am medically able and Il activities associated with the tablished by the club,
I assume all risks associated with being a falls, contact with other participants, the the conditions of the road, all such risks skateboards, baby joggers, roller skates of used in club organized activities and I agr	effects of the weather, i being known and appreci or roller blades, animals,	ncluding high heat a lated by me. I under	and/or humidity, traffic and rstand that bicycles,
By my signature, I agree to this waiver ar members and agree to the waiver for the		and that I have the a	authority to register these
Signature		Date	