2008 Long Distance Series
APPLICATION

Mail application and fees to:
CALUMET REGION STRIDERS
PO BOX 225
GRIFFITH, IN 46319

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ ( )

Business Phone: _____ ( )

E-Mail: _____

Heard about Striders from: _____

GOLD CUP SERIES MEMBER? ☐ Yes ☐ No

Fees: Gold Cup Member ($5.00) _____

Non-Gold Cup Member($10.00) _____

TOTAL ENCLOSED _____

I know that running and volunteering to work in club-sponsored events are potentially hazardous activities. I will refrain from entering and running in club activities if I am not medically able and/or properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running and volunteering for club sponsored events, including but not limited to, falls, contact with other participants, the effects of the weather including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application for membership, I, for myself, and anyone entitled to act on my behalf, waive and release the Road Runners Club of America, the Calumet Region Striders, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in these club activities, even though that liability may arise out of negligence or carelessness on the part of the person named in this waiver.

Signature: _____ **Date:** _____

PARENT'S SIGNATURE
(Minor under 18 yrs) _____

The Striders have permission to include my name, address, telephone number, and e-mail address in any CRS directory and/or website to be used for club purposes, only. Yes ☐ No ☐

OFFICE USE ONLY
Amt. Paid Date Check No.