



Selah Fun Runners Club

Today's date _____

Member application ____ Single ____ Family

____ New member ____ Renewing member

Name _____ Birth date _____ M/F _____

Spouse _____ Birth date _____ M/F _____

Street Address _____

City/State _____ Zip _____

email _____

Dues: \$5/year single ____

\$10/year family ____

Check payable to "Selah Fun Runners" and mail to 61 Lyle Ave, Selah WA 98942

Club Membership Application Waiver

I know that running and volunteering to work in club races are potentially hazardous activities. I should not enter and run in club activities unless I am medically able and 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 to work in the club races 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 for your acceptance of my application for membership, I, myself and anyone entitled to act on my behalf, waive and release the Selah Fun Runners and its officers and agents, all sponsors, their representatives and successors including the Road Runners Club of America, its officers, directors, agents and employees 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 careless on the part of the persons named in this waiver.

Signature and Date

Parent's signature if under 18 and date