

Frederick Steeplechasers Running Club Membership Application

Indicate the committees below that you would like to serve on to contribute to our running community (as many as you would like):

- | | | |
|-------------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Website | <input type="checkbox"/> Social | <input type="checkbox"/> Race Support |
| <input type="checkbox"/> Membership | <input type="checkbox"/> Training | <input type="checkbox"/> Newsletter |
| | <input type="checkbox"/> Competition | |

PLEASE PRINT CLEARLY

Please be sure to provide your email address so the club can contact you with any changes to our race schedule or any other events the club may host. We do not sell or give out emails to any person or entity.

First Name _____ MI _____ Last Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Email (please update) _____ Occupation _____

Birth Date _____ Age _____ Gender _____ Male _____ Female _____

Waiver and Release: I recognize that participation in activities of the organization may involve certain hazards. I understand that I should not participate unless medically able. I assume the risks associated with involvement in these activities, including but not limited to falls, contact with participants, effects of weather, road and traffic conditions—these risks being known and appreciated by me. Having read the Waiver and Release and considering the acceptance of my application, I for myself and anyone entitled to act on my behalf, waive and release the Frederick Steeplechasers Running Club, the Road Runners Club of America, and all sponsors and hosts, their representatives and successors, from any claim or liability from my involvement in activities of the organization.

Signature of Applicant (If applicant is under 18 years, parent or guardian must sign)

Return form and fee to:

Mail to:
FSRC
P.O. Box 681
Frederick, MD 21705-0681

OR . . . Drop off:
If The Shoe Fits
1507 West Patrick St.
Frederick, MD 21702

Type of Membership - Membership runs from January 1 to December 31

- ____ New ____ Renewal (Year joined _____)
- ____ Individual (\$20.00)
- ____ Second member in same household (\$15.00)
- ____ Jr. member – under 18 years of age (\$10.00)
- ____ Family (\$40.00)

Complete the following information when registering more than one member in the same household.

Second/Family Members

First Name _____ Last Name _____

Phone _____ Gender M F Age _____ Birth Date _____

First Name _____ Last Name _____

Phone _____ Gender M F Age _____ Birth Date _____

First Name _____ Last Name _____

Phone _____ Gender M F Age _____ Birth Date _____

First Name _____ Last Name _____

Phone _____ Gender M F Age _____ Birth Date _____

Please answer the following:

What are your running goals for the next year/for what event are you training?

What benefit(s) are you hoping to receive from the club?

Use this page ONLY if you are renewing and NONE of your information has changed. (We will not be responsible for information that has changed if you use this form)

Indicate the committees below that you would like to serve on to contribute to our running community (as many as you would like):

- | | | |
|-------------------------------------|--------------------------------------|---------------------------------------|
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