

Southern OREGON Runners

Promoting Running as an Exercise and a Sport
~ APPLICATION FOR MEMBERSHIP ~

(PLEASE PRINT)

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| <p>NAME: Last: _____ First: _____ Middle: _____</p> <p>STREET: _____</p> <p>City: _____ STATE: _____ ZIP: _____</p> <p>HOME PHONE : _____ WORK PHONE : _____</p> <p>CELL PHONE: _____</p> <p>EMAIL: _____</p> <p>BIRTHDATE: Month _____ Day _____ Year _____</p> <p>OCCUPATION: _____</p> <p>CHECK BOX: New Membership: <input type="checkbox"/> Renewal: <input type="checkbox"/></p> <p>FAMILY MEMBERS:</p> <p>NAME: _____ AGE: _____ BIRTHDATE: _____</p> <p>NAME: _____ AGE: _____ BIRTHDATE: _____</p> <p>NAME: _____ AGE: _____ BIRTHDATE: _____</p> <p>NAME: _____ AGE: _____ BIRTHDATE: _____</p> | <p>DUES:</p> <p>Individual \$12.50 Family \$15.00 Student \$ 5.00</p> <p>WANT TO HELP?</p> <p>General Help <input type="checkbox"/></p> <p>Race Registration <input type="checkbox"/></p> <p>Aid Stations <input type="checkbox"/></p> <p>Course Setup <input type="checkbox"/></p> <p>Finish Line <input type="checkbox"/></p> <p>Recruit Sponsors <input type="checkbox"/></p> <p>Race Photography <input type="checkbox"/></p> |
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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 the event organizer or official relative to my ability to safely complete the run. I assume all risks associated with running and volunteering to work in club races including, but not limited to: falls, contact with other participants, the effects of weather and conditions to the road and traffic on the course, all 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 Southern Oregon Runners 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 persons and entities named in this waiver. I grant permission to all of the foregoing to use my name, likeness and identity in any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Signiture (Parent or Guardian if under 18 years of age) Date

Make Checks Payable To: Southern Oregon Runners and Return to:
Southern Oregon Runners
P.O. Box 665
Medford, Oregon 97501