



Lakewood Ranch Running Club Membership Application Form

New Member Renewal | Male Female

Individual (\$20 Annual) Family (\$25 Annual)

Payable to: Lakewood Ranch Running Club
11915 Goldenaster Place
Lakewood Ranch, FL 34202

The Lakewood Ranch Running Club is dedicated to various running and walking activities, including weekly runs, group walks, triathlon training, local races, etc.

NAME:

HOME ADDRESS:

NEIGHBORHOOD:

CITY:

STATE:

ZIP CODE:

HOME PHONE:

CELL PHONE:

EMAIL ADDRESS:

DATE OF BIRTH:

AGE:

COMPANY NAME (IF SPONSORSHIP MEMBER):

WORK PHONE:

FAMILY MEMBER #1:

FAMILY MEMBER #2:

DATE OF BIRTH:

SEX:

DATE OF BIRTH:

SEX:

FAMILY MEMBER #3:

FAMILY MEMBER #4:

DATE OF BIRTH:

SEX:

DATE OF BIRTH:

SEX:

Lakewood Ranch Running Club Waiver:

I know that running and volunteering to work in the 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 and by any decision of a race official relative to my ability to safely complete a 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, 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 of membership, I, for myself and anyone entitled to act on my behalf, waive and release the Lakewood Ranch Running Club 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 named in this waiver. I grant permission to all the foregoing to use any photographs, motions pictures, recordings or any other record of an event for any legitimate purpose.

APPLICANT'S SIGNATURE:

DATE:

PRINT NAME OF PARENT OR GUARDIAN AND SIGNATURE:

(IF APPLICANT IS UNDER 18 YEARS OF AGE)