

2022 MEMBERSHIP APPLICATION



Mail application and fees to:

CALUMET REGION STRIDERS
PO BOX 225
GRIFFITH, IN 46319

**NOTE: ENTER MAILING AND EMAIL ADDRESSES
BELOW TO RECEIVE THE INSTEP NEWSLETTERS,
CRS CORRESPONDENCE, AND CRS EMAIL.**

					Dues must be paid to participate in Gold Cup Series				Optional Participation				Total Due			
First Name	Last Name	Birthdate		Gender		Individual Membership	Family Membership - covers all household members listed	5-Year Individual Dues	10-Year Individual Dues	Gold Cup Series						
		Month-Day	Year	M	F					Gold Cup Series Participant	Age Competition	Male Clydesdale 210 pounds plus	Female Athena 170 pounds plus			
Primary Household Member:					Check One						Check One					
Email Address:							\$15	\$20	\$55	\$100	\$35					+
Add'l Household Member:									\$55	\$100	\$35					+
Email Address:									\$55	\$100	\$35					+
Add'l Household Member:									\$55	\$100	\$35					+
Email Address:									\$55	\$100	\$35					+
Add'l Household Member:									\$55	\$100	\$35					+
Email Address:									\$55	\$100	\$35					+
ADDRESS _____ CITY, STATE ZIP _____ PHONE CONTACT _____					Less Discounts Applied: _____					-						
					Plus Optional Donations:											
					Jim Cox Scholarship Fund					+						
					Stevens-Hamilton Disabled Runner Fund					+						
					Total Enclosed					=						

I know running and volunteering 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 in 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 negligence or carelessness on the part of the person named in this waiver.

Signature: _____
 Parent's signature if under 18 years of age.

Date: _____