



# ST. PETE ROAD RUNNERS

## MEMBERSHIP APPLICATION (Please Print)

Renewal: Y / N

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact Name & Phone: \_\_\_\_\_

If joining as a family, please complete the following:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Birth Date: \_\_\_\_\_

We're a volunteer, non-profit organization. How can you help?

- |                                     |  |   |                                       |
|-------------------------------------|--|---|---------------------------------------|
| <input type="checkbox"/> Social     | <input type="checkbox"/> Membership    | <input type="checkbox"/> Education                | <input type="checkbox"/> Club Officer |
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Routes/Events | <input type="checkbox"/> Fund Raising/Sponsorship | <input type="checkbox"/> Other _____  |

**DUES:**

1 Student (18 or younger).....\$ 5

1 Single.....\$ 20

1 Family.....\$ 30

Donation Appreciated \$ \_\_\_\_\_

(donations are tax deductible)

Check out our website for more info:

**[www.sprrr.org](http://www.sprrr.org)**

**MEMBERSHIP RUNS FROM DATE OF ENTRY  
OR RENEWAL**

MEMBERSHIP BEGINS \_\_\_\_\_

MEMBERSHIP LENGTH \_\_\_\_\_ (YEARS)

AMOUNT PAID \$ \_\_\_\_\_ CHECK # \_\_\_\_\_

\* Please make your check payable to: St. Pete Road Runners  
Mail to: PO Box 14516, St. Petersburg, FL 33733

St. Pete Road Runners Club is a non-profit organization and member of the Road Runners Club of America.

**CLUB MEMBERSHIP APPLICATION WAIVER**

I know that running and volunteering to work at club races are potentially hazardous activities. I should not 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 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 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 St. Pete Road 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 rise out of negligence or carelessness on the part of the persons names in the waiver.

Signature \_\_\_\_\_ (parents if under 18)

Date \_\_\_\_\_