Daytona Beachcombers Running Club Membership Application

IF YOU RUN...FOR FUN...FOR HEALTH...FOR RECREATION... OR...IF YOU ARE A SERIOUS COMPETITOR...

WE HAVE SOMETHING FOR YOU!!!

Make checks payable to Daytona Beachcombers Running Club. Mail to: 290 Morningside Ave, Daytona Beach, FL 32118 Information: Donna Hiatt, 386-255-1279; donnadorun@cfl.rr.com

	Please circle members	hip type:	
1 year membership		2 year membership	
Individual	\$15	Individual	\$25
Family	\$25	Family	\$45
Student & Military	\$10	Student & Military	\$15
Senior (65)	\$10	Senior (65)	\$15
Name		M/F	
Name Last	First	M/F Gender B	irth Date
Address	City		Zip Code
Phone (h)	(w)	(cell)	
email		Occupation	
Please list the last three road races	you participated in:		
A portion of your annual dues gas a member of Road Runners		rly magazine, Club Running, y	ou will receive
I know that running and volunteering to participate in club activities unless I am relative to my ability to safely complete including but not limited to, falls, contact tions of the road and traffic on the cours these facts, and in consideration of your my behalf, waive and release the Road representatives and successors from a though that liability may arise out of neg	medically able and properly trained. the run. I assume all risks associate with other participants, the effects of e, all such risks being known and ap- acceptance of my application for m Runners Club of America, the Dayto Il claims or liabilities of any kind arisi	I agree to abide by any decision of a r d with running and volunteering to worl of the weather, including heat or humidi opreciated by me. Having read this wai embership, I, for myself and anyone en ona Beachcombers Running Club and a ng out of my participation in these club	ace official k in club races, ty, the condi- iver and knowing titled to act on all sponsors, their
Signature (Parent if a minor	·)		

Signature _____

Signature _