



Membership type : New Membership Renewal Membership Dues: \$25 Single \$30 Family

Name _____

Address _____

City _____ State _____ Zip Code _____

Home phone () _____ e-Mail address _____

Participating Family Members:

Name _____ Age _____

Name _____ Age _____

Participating Family Members:

Name _____ Age _____

Name _____ Age _____

How did you hear about us? _____

Would you be interested in hosting a workout or group run? Yes Maybe Not sure

WAIVER

I know that running and volunteering to work with Cox Running Club races and programs are potentially hazardous activities. I should not enter and run/walk in these 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 participate in an event. I assume all risks associated with my participation in Cox Running Club races and programs including, but not limited to falls, contact with other participants, the effects of the weather including high heat and/or humidity, rain, ice, the condition 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 Cox Running Club, the Road Runners Club of America, 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.

Date: _____

Signature of Applicant (Parent or guardian must sign if applicant is under 18 years old)

Mail completed Membership form and payment to Cox Running Club, 5017 Rancho Verde Parkway, Crowley, TX 76036