

2018 SFTC MEMBERSHIP APPLICATION

Membership year is January 1, 2018 through December 31, 2018

Register your membership **ONLINE** at RunTriCities.org

Individual \$15 ____
Family \$20 ____
Youth (age 25 and under) \$10 ____

Make checks payable to SFTC

MAIL TO: Karen Seiferth

**SFTC Membership Chair
1903 Millbrook Drive
Johnson City, TN 37604**

* Family memberships apply to members living at the same address.

Full or partial payment may be made with SFTC Volunteer Points (1 point = \$1). Number used: ____

Contribution to Scholarship Fund \$ ____ Capital Fund \$ ____

Name ____ Birth Date ____/____/____ Gender ____

Address ____ City ____ State ____

Zip ____ Phone ____ E-mail ____

* **FAMILY** – List all **additional** family members to be included in membership:

1. Name ____ Birth Date ____/____/____ Gender ____

E-mail ____

2. Name ____ Birth Date ____/____/____ Gender ____

E-mail ____

3. Name ____ Birth Date ____/____/____ Gender ____

E-mail ____

4. Name ____ Birth Date ____/____/____ Gender ____

E-mail ____

Volunteer opportunities: note which member (numbered above) the activity applies to:

____ Help at races ____ Help with Social Events ____ Serve on the SFTC Board

____ Act as liaison between SFTC and a race

____ Help transport equipment to/from events

____ Be a SFTC competition scorekeeper

Other (please describe) ____

I know that running and volunteering to work in 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 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 State of Franklin Track Club and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of participation in these club activities even though that liability may arise out of negligence of carelessness on the part of the persons named in this waiver.

SIGNATURE

PARENT'S SIGNATURE (under 18 yr)

DATE