

BARA Membership Application

Individual Membership (please print clearly)

Name: _____

Address: _____

City, State, ZIP: _____

Phone #: _____ Birthdate: _____

Gender: () Male () Female

Email: _____

Family Membership

Please provide the names, birthdates, and emails for each additional member of your family.

Name: _____ Birthdate: _____ Email: _____

Name: _____ Birthdate: _____ Email: _____

Name: _____ Birthdate: _____ Email: _____

Membership Options

Membership fees are nonrefundable and are good for one year from the date we receive your payment.

Circle one: *Individual—\$25* *Family—\$45* TOTAL \$_____

**Payment Method (make checks payable to Bloomington Area Runners Association;
to pay by credit card, please register online at <http://bararunners.wix.com/bara>)**

Circle one: Cash Check

Please sign the waiver on the next page and mail with payment to:

Bloomington Area Runners Association

P.O. Box #874

Bloomington, IN 47402

Or drop off your form with payment at a group run!

Club Membership Waiver of Participation

I agree that I am a member of Bloomington Area Runners Association, and I know that running in and volunteering for organized group runs, social events, and races with this club are potentially hazardous activities, which could cause injury or death. I will not participate in any club organized events, group training runs or social events, unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform all activities associated with the club and am in good health, and I am properly trained. I agree to abide by all rules established by the club , including the right of any official to deny or suspend my participation for any reason whatsoever.

I attest that I have read the rules of the club agree to abide by them. I assume all risks associated with being a member of this club and participating in club activities which may include: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates, or roller blades are not allowed to be used in club organized activities and I agree to abide by this rule. I assume full responsibility for the behavior of guests, children, and/or pets that I bring to a club organized activity.

Having read this waiver and knowing these facts and inconsideration of your accepting my membership, I, for myself and anyone entitled to act on my behalf, waive and release the Bloomington Area Runners Association, the city of Bloomington, and the Road Runners Club of America, all club sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation with the club, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record for any legitimate promotional purposes for the club.

Signature: _____

Date: _____

Parent's Signature if under 18 years: _____

Date: _____