



Auburn Opelika Running & Track Association

## 2017 Membership Application

### Membership Benefits:

- Eligibility to join the 1200 Mile Club
- Invites to our Annual Social Gatherings (holiday party, etc.)
- Email notifications of upcoming races and events
- Water provided voluntarily by those running
- Opportunity to give back to the community by volunteering at local races

### Annual Fees (new member and renewals)

Membership period runs for one year from the day of membership.

[Check one]

☐ Individual: \$25

☐ Family: \$30

Name(s): \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Birthday(s) (optional): \_\_\_\_\_

### AORTA Membership Waiver of Participation

I agree that I am a member of Auburn Opelika Running & Track Association (hereby referred to as AORTA), and I know that running in and volunteering for organized group runs, social events, and races with AORTA are potentially hazardous activities, which could cause injury or death. I will not participate in any AORTA 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 AORTA and am in good health, and I am properly trained. I agree to abide by all rules established by AORTA, 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 AORTA and agree to abide by them. I assume all risks associated with being a member of AORTA 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. Having read this waiver and knowing these facts and in consideration of your accepting my membership, I, for myself and anyone entitled to act on my behalf, waive and release AORTA, the cities of Auburn and Opelika, 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 AORTA, 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 AORTA.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature if under 18 years: \_\_\_\_\_ Date: \_\_\_\_\_

Make checks payable to AORTA and mail to:

**AORTA**  
**P.O. Box 975**  
**Auburn, AL 36831-0975**

Check [www.auburnrunning.org](http://www.auburnrunning.org) for group runs, races and other events