

Delaware Sports Club – Individual Membership Application

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

e-mail Address: _____

_____ **Please send an individual USATF membership application.**

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 or club official relative to my ability to safely complete the run. I assume all risks associated with running and volunteering to work in club events 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 Delaware Sports Club, Inc., and its officers and agents, all sponsors, their representatives and successors, including the Road Runners Club of America, its officers, directors, agents, and employees, 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.

Signature of Member (Signature of Parent or Guardian if member is under 18 years of age.)

Date _____

Dues:

DELAWARE SPORTS CLUB INDIVIDUAL DUES: \$6.00 PER CALENDAR YEAR
DELAWARE RUNNING CLUB INDIVIDUAL ADD-ON: \$14.00 PER CALENDAR YEAR
(INCLUDES SINGLET)
TOTAL DUES REMITTED: \$ _____

Make Checks Payable to: "DELAWARE SPORTS CLUB"

Please send this form and dues to:

MEMBERSHIP CHAIRPERSON
DELAWARE SPORTS CLUB
P.O. BOX 226
WILMINGTON, DE 19899