

# Lisle Windrunners

Annual membership in the Lisle Windrunners is just \$15.00 per family. This entitles you and anyone in your immediate family (same address) to participate in our club race circuit for fun, fitness and compete for awards and prizes. You also get to meet and make a lot of good friends who will run with you and encourage you to meet your running goals. There are a lot of other good reasons, so just print, fill in the blanks legibly and mail with your payment to the address below. Please list any other members of your family, spouse and/or children, if they plan to run circuit races and wish to be included in the results. They will also be eligible for circuit and participation awards.

## **Primary Member**

First: \_\_\_\_\_ Last: \_\_\_\_\_ Sex: M F Birth date: \_\_\_/\_\_\_/\_\_\_\_\_

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

Home phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_-\_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_-\_\_\_\_\_

Email address: \_\_\_\_\_ Referred by: \_\_\_\_\_

## **Family Members**

First: \_\_\_\_\_ Last: \_\_\_\_\_ Sex: M F Birth date: \_\_\_/\_\_\_/\_\_\_\_\_

First: \_\_\_\_\_ Last: \_\_\_\_\_ Sex: M F Birth date: \_\_\_/\_\_\_/\_\_\_\_\_

First: \_\_\_\_\_ Last: \_\_\_\_\_ Sex: M F Birth date: \_\_\_/\_\_\_/\_\_\_\_\_

First: \_\_\_\_\_ Last: \_\_\_\_\_ Sex: M F Birth date: \_\_\_/\_\_\_/\_\_\_\_\_

I know that running and volunteering to work in club races are potentially hazardous activities. I should not enter and run in the club activities unless I am medically able and properly trained. I agree to abide by the decision of a race official relative to my ability to safely complete any event. I assume all risks associated with running and volunteering to work in club races, included, but not limited to, falls, contact with participants, the effects of the weather, including high heat 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 the 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 Lisle Windrunners and all sponsors, their representatives and successors from all claims or liabilities to 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 in this waiver.

**All members age 18 and over must sign this waiver.**

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

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

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

Please make your check payable to: Lisle Windrunners

Mail to: Lisle Windrunners, P.O. Box 3574, Lisle, IL 60532

If you have any questions or want more information about the club, please visit us on-line at [www.windrunners.org](http://www.windrunners.org) or contact Joe Arnold by e-mail at: [JArnold29@comcast.net](mailto:JArnold29@comcast.net)