NORTH MEDFORD CLUB

2022 MEMBERSHIP APPLICATION

NAME (print clearly)		M/F
ADDRESS:		
CITY/STATE/ZIP CODE:		
HOME PHONE: CELL PI	HONE:	
New Membership RenewalYear Joined	_	
Membership Plan (check one)Single (\$15.00)Family (\$20.00)	00)65 yrs (\$	55.00) 70 yr. (Free)
under 18 (Free)30 yr. member (Free) Are you willing to Vo	olunteer at Club Ra	ces & Events
Club Membership Waiver		
I know that running & volunteering to work in club races are poten and run in club activities unless I am medically able and properly to official relative to my ability to safely complete the run. I assume all risks associated with running and volunteering to worl contact with other participants, the effects of the weather, inclused the road and traffic on the course, all such risks being known a	rained. I agree to k in club races inc ding high heat and	abide by any decision of a race luding, but not limited to, falls, d/or humidity, the conditions
Having read this waiver and knowing these facts, and in consideral membership, I, for myself and anyone entitled to act on my behalf America, the North Medford Running Club and all sponsors, their or liabilities of any kind arising out of my participation in the club out of negligence or carelessness on the part of the persons name	tion of your accep f, waive and releas representatives a activities even th	otance of my application of se the Road Runners Club of nd successors from all claims
EMAIL ADDRESS: (PLEASE PRINT CLEARLY):		
SIGNATUREPARENTS	5 (If under 18)	
FAMILY MEMBERSHIP, PLEASE LIST: (OFFICE USE (ONLY)	
NAMEDOB	_AMT.PAID	HAS CARD
NAMEDOB	_ NEEDS CARD	DATE:

*****NOTE PLEASE: MAKE CHECK OUT THE NORTH MEDFORD CLUB AND PAY AT ANY CLUB RACE OR SEND APPLICATION AND A CHECK TO GEORGE HIGGINS, 100 LINDELL AVE, LEOMINSTER, MA. 01453-5457