

**ZOOMERS SOUTHWEST FLORIDA  
RUNNING & TRIATHLON CLUB**  
P.O. Box 380276  
Murdock, FL 33938  
[www.ZoomersRun.com](http://www.ZoomersRun.com)



**MEMBERSHIP APPLICATION/RENEWAL**  
(Each family member must fill out a separate application and waiver)

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Membership Student (\$5) \_\_\_\_\_ Single (\$15) \_\_\_\_\_ Family (\$20) \_\_\_\_\_ New \_\_\_\_\_ Renewal \_\_\_\_\_

**Check Areas in Which You Are Willing to Work:** Race Planning \_\_\_\_\_ Membership \_\_\_\_\_ Fun Runs \_\_\_\_\_  
RACE DAY: Same Day Registration \_\_\_\_\_ Race Clock Operation \_\_\_\_\_ Computer Operation \_\_\_\_\_ Finish Line \_\_\_\_\_  
Club Meetings, Parties & Other Social Events \_\_\_\_\_ Newsletter \_\_\_\_\_ Public Relations \_\_\_\_\_

**Membership Application Waiver:** I know that running, biking, swimming and volunteering to work in club races are potentially hazardous activities. I should not enter and participate in club activities unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running and volunteering to work in club races including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, 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 Road Runners Club of America, Inc., Zoomers Southwest Florida Running and Triathlon Club, and all sponsors, their representatives and successors from all claims and liabilities of any kind arising out of my participation in these club activities even though liability may arise out of negligence or carelessness on the parts of the persons named in the waiver. I grant permission to all afore-mentioned to use photographs, motion pictures, or any other record of any event for any legitimate purpose.

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

Parents Signature if under 18 years of age \_\_\_\_\_

