

Casper Windy City Striders --- 2009 Membership

The purpose of the Casper Windy City Striders (CWCS) is to promote and encourage running related activities for runners of all ages and abilities. Annual dues in the CWCS running club are \$25 (individual) and \$40 (family). Membership in this organization includes discounted race prices, enrollment in the Road Runners Club of America (including RRCA runner's insurance), a year subscription to The Colorado Runner magazine, a CWCS T-Shirt and the CWCS newsletter.

CWCS is an entirely volunteer organization and your help with any of the club's activities will be appreciated. Please let us know how the Striders can help you meet your running needs.

Club Membership Application Waiver

I know that running and volunteering to work in Casper Windy City Strider (CWCS) races are potentially hazardous activities. I should not enter and run in CWCS 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, 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 my 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 CWCS and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in these CWCS club activities even though that liability may arise out of negligence or carelessness on the part of the person named in this waiver.

Membership Type: Individual - \$25 (____) Family - \$40 (____)

Signature _____ Date ____/____/____

Parents signature if under 18 years old _____

Name (print) _____

Address _____

City _____ State _____ Zip _____

Email address _____

Phone # _____ Birth Date ____/____/____ Shirt Size _____

Family membership: Please list other family members below and birth dates:

Name: _____ DOB: ____/____/____ Shirt Size: _____

Name: _____ DOB: ____/____/____ Shirt Size: _____

Name: _____ DOB: ____/____/____ Shirt Size: _____

Name: _____ DOB: ____/____/____ Shirt Size: _____

Instructions: Make check payable to 'Casper Windy City Striders' and mail application to:
CWCS, P.O. Box 52161, Casper, WY 82605 or hand deliver it at the next race