



2009 Membership Application

Please print legibly:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Sex: M F Birth Date: ____/____/____

E-mail address: _____

Cell Phone: (_____) _____

Spouse Name: _____

New Member: \$10/yr. Renewal Membership: \$10/yr.

WAIVER: I assume all risks associated with club races & events for myself and my minor family members, including, but not limited to, falls, contact with participants, effects of weather, the conditions of the course, 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 Cleveland Southeast Running Club, and all sponsors, their representatives and successors from all claims and liabilities of any kind arising out of my participation in any club activities. I hereby grant permission to the Cleveland Southeast Running Club to use photographs of myself and/or my minor family members in Cleveland Southeast Running Club newsletters and/or brochures.

Signature: _____ Date: _____

Please send form and membership payment to:

Cleveland Southeast Running Club

Janet Edwards, Treas.

PO Box 464

Parkman, OH 44080

Visit us online at:
www.southeastrunningclub.org

