



MEMBER INFORMATION

Name: _____

Birth Date _____

Address: _____

Street Address

City

State

Zip

Email: _____ Phone: (____) _____

Emergency Contact Name: _____ Phone: (____) _____ Relation: _____

MEMBERSHIP TYPE

_____ **Active Membership (\$80.00)** – I would like to become an official member of the Salinas Valley Elite Running Club. I will join club workouts and runs. I will commit to the club's fundraising and volunteer efforts and I would like to receive emails, newsletters, and social invitations. As an active paid member I understand that I will receive a club shirt, training, and access to one club sponsored destination event in which the club will cover the cost of transportation.

_____ **College Student (\$20.00)** – I agree to all of the above qualifications of the Active member. I will also help with the club's fundraising efforts. Please include me on the email list for updates and social functions.

_____ **Honorary High School Student (no fee)** – I am a local high school student who plans to train with the club during the off season of high school cross country and/or track & field.

As a club member, you will receive a club shirt. Please select your shirt size:

Men's _____ XXL _____ XL _____ L _____ M _____ S

Ladies' _____ XXL _____ XL _____ L _____ M _____ S

CLUB MEMBERSHIP APPLICATION WAIVER

I know that running and volunteering to work in club races are potentially hazardous activities. I should not enter and run 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, 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 in consideration of your acceptance of my application for membership, I, for myself and anyone entitled to act on my behalf, waive and release Salinas Valley Elite RC, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in these club activities that may arise out of negligence or carelessness on the part of the persons named in this waiver. I also agree to adhere to any decisions and/or agreements between Salinas Valley Elite RC and its sponsors. Further, I hereby grant full permission to Salinas Valley Elite to use any photographs, motion pictures, recordings, or any other record of these events for any legitimate purpose, including commercial advertising, without monetary payment to me.

Annual membership begins January 1 and ends on December 31 of each year. I understand that I am responsible for full payment of membership fees upon renewal of my membership with the club. Renewal fees are due on January 1 of each year. I understand that availability of training may be impacted by local Public Health directives.

Signature: _____

Date: _____

Please mail application & check to: SALINAS VALLEY ELITE RUNNING CLUB ~ P.O. Box 540 Salinas, CA 93902

Updated 12/28/21, E.G.